
NSCRT Policy Manual – Section 5 Continuing Competency



REV JUNE 2025

Nova Scotia College of Respiratory Therapists

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Policy Title: Continuing Competency Program Policy	
Date Approved: January 6, 2020, June 17, 2025	Category: Continuing Competency
Date of next revision: June 2028	Authority: Credentials Committee

Policy Statement:

The Nova Scotia College of Respiratory Therapists (NSCRT) 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 Credentials Committee and approved by the NSCRT Board of Directors to ensure that all licensed members of the NSCRT maintain and further develop the competencies required to safely, competently and ethically provide clinically appropriate care.

Definitions:

- **Audit** – An official review by the NSCRT of members’ practice and/or practice areas, generally performed via review of professional portfolios.
- **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.
- **Continuing Education Credits (CECs) – Board approved** activities that have been defined as eligible under the continuing competency program.
- **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 NSCRT.
- **E-Volve E-learning module** – A mandatory, online continuing education credit developed by the NSCRT to assist members in acquiring information relevant to practice and to maintain currency.
- **E-Volve Self-Assessment Tool** – A mandatory, online assessment tool developed by the NSCRT to assist members in self-identifying areas of professional development.
- **Learning Log** – An online record, located on NSCRT members’ portal, where identification of learning objectives and learning activities, including resource description, dates of completion, 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.

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- **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:

- 1.0 All active practice members must adhere to the NSCRT's Continuing Competency Program (CCP) to be eligible for a license in the active practice category.
- 2.0 A percentage of members, in accordance with the NSCRT bylaws, will be randomly selected annually for an audit of their professional portfolio to ensure ongoing compliance with the CCP.
- 3.0 The requirements of the CCP are as follows:
 - 3.1 At least 1500 hours practising respiratory therapy in the previous 4 years.
 - 3.1.1 Members must record their estimated number of hours per year and over the last 4 years in the appropriate section of their online member profile.
 - 3.1.2 Members who are audited will be required to provide verification of hours worked in the last 4 years from the employer.
 - 3.2 Annual completion of the online E-Volve E-learning module prior to the renewal deadline.
 - 3.3 Annual completion of the online E-Volve Self-assessment tool **and identification of learning objectives.**
 - 3.4 Annual completion of the online learning log:
 - 3.4.1 Members must enter 2 defined learning objectives prior to the renewal deadline.
 - 3.4.1.1 Learning objectives are selected from the completed E-volve Self-Assessment Tool. Competencies rated developing or competent will be available for selection as learning objectives. When selected the objective will automatically populate the learning log. Members must select a minimum of two objectives from the populated list.
 - 3.4.1.2 Members must self-assess on at least one Core Competency for each Quality chosen.
 - 3.4.2 If randomly selected for the audit process, members must complete their professional portfolio on their online member portal. Professional portfolios must also include:
 - 3.4.2.1 Identification of which learning objective each CEC is related to;
 - 3.4.2.2 Identification of the CEC;
 - 3.4.2.3 Identification of the date CEC attained;
 - 3.4.2.4 Completion of the self-reflection section detailing how the CEC impacted the member's practice.
 - 3.4.2.5 Employer verified proof of practice hours in the last 4 years.
- 4.0 Members are responsible for attaining learning in the identified areas and must contact the NSCRT Registrar during the license year if unable to find appropriate resources.
- 5.0 Renewal applications for an active practice licence will not be approved until completion of the e-learning module and step 3.4.1 of the online learning log.

6.0 Members who complete the CCP requirements and submit a renewal application after the renewal deadline will be subject to late fees as detailed in the bylaws.

7.0 Members who allow their practice license to expire will be subject to reinstatement fees as detailed in the bylaws.

8.0 Members who fail to complete the required pre-renewal CCP elements prior to the end of the licensing year but submit a renewal application will be granted a 3-month temporary licence within which the CCP requirements must be met.

8.1 Upon completion of the CCP requirements and notification of the Registrar, temporary license holders will immediately be granted an active-practice license provided there are no other licensing restrictions on their file.

8.2 Upon expiry of a temporary license granted secondary to failure to comply with the pre-renewal CCP requirements, the member's license to practice will expire.

8.3 Extensions to temporary licenses are granted in extenuating circumstances only and at the discretion of the Registrar.

9.0 Members who refuse to comply with the CCP requirements despite attempts at remediation will have their file referred to the Complaints Committee for professional misconduct.

Policy Title: Audit Policy	
Date Approved: January 6, 2020, June 17, 2025	Category: Continuing Competency
Date of next revision: June 2028	Authority: Credentials Committee

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 NSCRT maintain and further develop the competencies required to safely, competently and ethically provide clinically appropriate care. Through an annual audit of randomly selected member professional portfolios, the NSCRT ensures members comply with this mandatory program

Definitions:

- **Audit** – An official review by the NSCRT of members' practice and/or practice areas, generally performed through review of professional portfolios.

- **Audit Assessment Criteria Rubric (AACR)** – An audit scoring system, listing all 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 Competency Program (CCP)** – A regulatory program and quality assurance mechanism that ensures ongoing education is taking place for all active practice members of the NSCRT.
- **Continuing Education Credits (CECs)** – Board approved activities that have been defined as eligible under the continuing competency program.
- **E-Volve E-learning module** – A mandatory, online continuing education credit developed by the NSCRT to assist members in acquiring information relevant to practice and to maintain currency.
- **E-Volve Self-Assessment Tool** – A mandatory, online assessment tool developed by the NSCRT to assist members in self-identifying areas of professional development.
- **Learning Log** – An online record, located on NSCRT members' portal, where identification of learning objectives and learning activities including resource description, dates of completion 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:

1. The NSCRT audits a percentage of Active-Practice license members' professional portfolios annually, as per the Bylaws.
2. Member professional portfolios are the electronic record of member continuing education credits (CECs) and competency maintenance activities and their employer verified currency hours.
3. All NSCRT audits and audit scoring is strictly confidential. All parties involved in reviewing professional portfolios and scoring are bound by the NSCRT's Code of Conduct and Confidentiality policy.
4. Audit Selection Process:
 - 4.1. Following annual renewal, the audit sample is generated through random selection by the Registrar using a random number generator. The numbers generated correspond with the member's row in the data base.
 - 4.2. Following the random selection of members, the generated list is printed, signed and dated by the Registrar and witnessed by the Chair of the Credentials Committee. It is then saved as per the NSCRT Document Storage Policy.

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- 4.3. Members will be notified by email, no later than June 1, advising they have been selected for audit of their professional portfolio.
 - 4.4. The Registrar and Credentials Committee may specifically select members for audit outside of the random selection process if deemed appropriate. Such reasons include:
 - 4.4.1.Submission of a non-compliant professional portfolio in the previous audit year,
 - 4.4.2.Declaration of non-compliance with the CCP in disclosure statement during online renewal or declaration to the Registrar and/or member of the Credentials Committee at any time of non-compliance with the CCP;
 - 4.4.3.As part of an ongoing investigation and/or disciplinary decision;
 - 4.4.4.Late submission of selected member's professional portfolio in the previous audit year; and
 - 4.4.5.Any other reason deemed appropriate by the Credentials Committee.
5. Professional Portfolio Submission Process
 - 5.1. Continuing Education Credit requirements include the following:
 - 5.1.1.Completion of the E-Volve E-learning module prior to renewal;
 - 5.1.2.Completion of the E-Volve Self-Assessment Tool and selection of a minimum of 2 learning objectives with member renewal;
 - 5.1.3.Completion of the online learning log; and
 - 5.1.4.Employer verified record of hours that the member has worked in the immediate previous 4-year period.
 - 5.2. Members must submit audited portfolios by July 1. Failure to submit a completed professional portfolio on time will result in an automatic audit the following license year.
 - 5.3. Members must upload all requirements to their NSCRT online member profile.
 - 5.4. No member shall be audited 2 consecutive years, except for the reasons stated in section 4.4.
 6. Audit Review Process
 - 6.1. All audited professional portfolios are reviewed and scored by the Registrar using the Audit Assessment Criteria Rubric (AACR), as detailed in the NSCRT Audit Assessment Criteria Rubric Policy.
 - 6.2. The Credentials Committee is responsible for reviewing the audited professional portfolios of the Registrar should they be randomly selected or selected for the reasons stated in section 4.
 - 6.3. Professional portfolios deemed non-compliant with the CCP will be referred to the Credentials Committee for review and final decision and/or any required remediation.
 7. Members will be notified via email of compliance or non-compliance with the CCP by September 1.
 8. Notification emails will contain the following information
 - 8.1. Compliant submissions
 - 8.1.1.Notification letter of compliance
 - 8.1.2.Copy of AACR.

8.2. Non-compliant submissions

- 8.2.1. Notification letter of non-compliance detailing: deficiencies, remediation process, timelines, and
- 8.2.2. Copy of AACR.

9. Noncompliant or In-complete Portfolio Process

- 9.1. Following a non-compliant AACR score by the Registrar, the portfolio will be referred to the Credentials Committee.
 - 9.2. For transparency, the Credentials Committee will independently score the professional portfolio using the AACR.
 - 9.3. No member names will be submitted on professional portfolios that are referred to the Credentials Committee, only the non-identifying learning log will be provided with a briefing note from the staff providing any additional required details.
 - 9.4. The Credentials Committee is responsible for the final decision regarding compliance.
 - 9.5. In collaboration with the Registrar, the Credentials Committee will detail steps the member must take to attain compliance.
 - 9.6. The Registrar will communicate with the member the remediation process.
 - 9.7. Remediation process may include, but is not limited to, the following:
 - 9.7.1. Late submission penalty - Automatic inclusion in the audit process the following audit year;
 - 9.7.2. Assigned learning opportunities;
 - 9.7.3. Counselling on self-assessment, development of learning plans, and/or self-reflection; or
 - 9.7.4. Any other supportive measure deemed necessary by the Credential Committee.
 - 9.8. The Registrar will score the updated professional portfolio within 7 days of receiving it.
 - 9.9. Following a non-compliant AACR score of the updated professional portfolio by the Registrar, the portfolio will again be referred to the Credentials Committee for independent scoring and consideration of referral to the Complaints Committee.
 - 9.10. The Credentials Committees is responsible for the final decision regarding compliance.
 - 9.11. Based on the results of the scoring, the Credentials Committee will:
 - 9.11.1 Issue a letter of compliance to the member, including a copy of the AACR; or
 - 9.11.2 Issue a letter of non-compliance to the member, including a copy of the AACR, notifying them of next steps.
10. Non-compliance with the NSCRT CCP, despite attempts at remediation by the Credentials Committee, can result in progressive disciplinary action, including referral to the NSCRT Complaints Committee for professional misconduct.

Policy Title: Audit Assessment Criteria Rubric Policy	
Date Approved: January 6, 2020, June 17, 2025	Category: Continuing Competency
Date of next revision: June 2028	Authority: Credentials Committee

Policy Statement:

The Nova Scotia College of Respiratory Therapists (NSCRT) 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 Credentials Committee and approved by the NSCRT Board of Directors to ensure that all licensed members of the NSCRT maintain and further develop the competencies required to safely, competently and ethically provide clinically appropriate care. Through an annual audit of randomly selected member 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)** – Board approved activities that have been defined as eligible under the continuing competency program.
- **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 NSCRT.
- **E-Volve E-learning module** – A mandatory, online continuing education credit developed by the NSCRT to assist members in acquiring information relevant to practice and to maintain currency.
- **E-Volve Self-Assessment Tool** – A mandatory, online assessment tool developed by the NSCRT to assist members in self-identifying areas of professional development.

- **Learning Log** – An online record, located on the NSCRT members’ portal, where identification of learning objectives and learning activities, including resource description, date of completion, 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 NSCRT’s Audit policy (exceptions made in extenuating circumstances only by approval of Registrar before submission deadline.)
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:
 - 4.1. Completion of the online, E-Volve E-learning module CEC, prior to the license renewal deadline.
 - 4.2. Completion of E-Volve Self -Assessment Tool **and identification of learning objectives via the self-assessment tool.**
 - 4.2.1. Goals chosen can be from same quality or from two different framework qualities.
 - 4.2.2. Members must self-assess on at least one Core Competency for each framework quality chosen.
 - 4.3. Completion of online Learning Plan
 - 4.3.1. Identification of learning objectives through the Self-Assessment Tool, prior to the license renewal deadline.
 - 4.3.2. Self-Assessment completed with renewal
 - 4.3.3. Learning objectives identified (minimum of 2) – must be directly related to practice or anticipated change in practice.
 - 4.3.4. Members may choose to define an area of focus related to the chosen objectives (optional)
 - 4.4. Completion of learning log with audit submission
 - 4.4.1. Resource Description: Learning activity/CEC resources identified and directly relate to each objective..

4.4.2. Date of completion: Resource completion date identified and within audit year.

4.4.3. Self-reflection: Completed and related to objectives chosen, learning activities used, and learning plan. Demonstrates incorporation into member's day to day practice.

5. Members are responsible for attaining learning in the identified learning objectives areas and must contact the Registrar before the end of the license year if they are unable to find applicable resources.
6. Submissions deemed non-compliant with the above criteria are referred to the Credentials Committee for review and remediation.
7. Remediation plan for non-compliant submission:
 - 7.1. Communication with member.
 - 7.2. Remediation plan discussed and adopted.
 - 7.3. Target date for completion set.
8. Remediation unsuccessful:
 - 8.1. Communication with member.
 - 8.2. Member's portfolio submission result and related data forwarded to Complaints Committee.

Policy Title: E-Learning Mandatory CEC Policy	
Date Approved: January 6, 2020, June 17, 2025	Category: Continuing Competency
Date of next revision: June 2028	Authority: Credentials Committee

Policy Statement:

The Nova Scotia College of Respiratory Therapists (NSCRT) 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 Credentials Committee and approved by the NSCRT Board of Directors to ensure that all licensed members of the NSCRT maintain and further develop the competencies required to safely, competently and ethically provide clinically appropriate care. The E-Volve e-learning module is a mandatory continuing education credit of the continuing competency program used to provide members with an educational review of current and new legislation, regulation, standards, guidelines, and information on any evolving issues related to health care and the provision of safe and ethical care.

Definitions:

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- **Continuing Competency Program (CCP)** – A regulatory program and quality assurance mechanism that ensures ongoing education is taking place for all active practice members of the NSCRT.
 - **Continuing Education Credits (CECs)** – Board approved activities that have been defined as eligible under the continuing competency program.
 - **E-Volve E-learning module** – A mandatory, online CEC developed by the NSCRT to assist members in acquiring information relevant to practice and to maintain currency.

Policy/Procedure:

1. The e-learning module is accessible solely via the NSCRT website.
2. The e-learning module is not a pass/fail examination. It is presented as an open book format.
3. The module will contain up to 25 multiple choice questions.
4. The format will be such that each section will provide content necessary to answer the question, followed by the question(s). The content may be written or in video format.
5. If an incorrect answer is chosen in any section, the member will be required to repeat the section until all questions are answered correctly.
6. Once the correct answer(s) is chosen, the member will be provided with the rationale for the answer.
7. Each question in the module will provide the member with a comment section to provide feedback on the question.
8. The e-learning module must be completed annually prior to license renewal and will be accessible upon the opening of license renewal annually.
9. All members applying for an active practice license must complete the module within the license renewal window.
10. Each member must complete the module under their own NSCRT member profile to be credited with successfully completing the module.
11. Deferrals will be allowed in extenuating circumstances only following submission of a written request to the Registrar. The decision of the Registrar is final.

Policy Title: Jurisprudence Examination Policy	
Date Approved: February 13, 2022, June 17, 2025	Category: Continuing Competency
Date of next revision: June 2028	Authority: Credentials Committee

Policy Statement:

The Nova Scotia College of Respiratory Therapists' (NSCRT) Jurisprudence examination is a mandatory requirement for all initial applicants. As part of its public protection mandate, the NSCRT has a responsibility to ensure all individuals who practice in Nova Scotia are aware of applicable provincial legislation, regulatory issues, NSCRT policies, practice guidelines and position statements that may impact a respiratory therapist's ability to provide safe, effective, and ethical care to Nova Scotians.

Policy and Procedure:

- In addition to submission of all required documentation and any applicable registration fees (application fee or licensing fee), initial applicants to the NSCRT, in all license categories, must successfully complete the online jurisprudence examination.
 - Initial applicants are applicants who have never previously held a license, in any category, with the NSCRT.
- The exam will be accessible upon creation of an online profile and submission of an online application through the NSCRT website at www.nscrt.com.
- The exam is comprised of a series of multiple-choice questions.
- The format will be such that each section will provide written content necessary to answer the question, followed by the question(s).
- Embedded in the content may be applicable hyperlinks that will provide additional resources to assist in answering the question.
- Following the exam, the applicant will immediately receive notification of pass or fail.
- Applicants may make as many attempts as necessary to successfully pass the exam.
- Applicants who are unable to successfully complete the exam must contact the Registrar who will provide assistance in completion.
- Deferrals will be allowed in extenuating circumstances only following submission of a written request to the Registrar.

Appendix A

Rev June 2025

Audit Assessment Criteria Rubric (AACR) – Audit Scoring Sheet

Member Name:			Member #:	
PROFESSIONAL PORTFOLIO REVIEW DATE	ON TIME	EXCUSED LATE	LATE	MEMBER TO BE AUDITED NEXT YEAR

CURRENCY HOURS VERIFIED	YES	NO

E-LEARNING MODULE COMPLETE	YES	NO

E-VOLVE SELF ASSESSMENT TOOL	YES	NO
Self-assessment Tool completed with renewal		
Learning objectives identified (minimum of 2)		

PROFILE AND LEARNING LOG	YES	NO
Learning objectives directly related to practice or anticipation of a change in practice.		
Learning activity/CEC resources identified and DIRECTLY RELATE to each objective		
Resource completion date identified and within audit year		

Profile current and complete		
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SELF REFLECTION	YES	NO
Self-Reflection completed		
Self-Reflection related to objectives chosen, learning activities used, and learning plan		
Self-reflection demonstrates incorporation into registrant's day to day practice		

Notes: _____

PORTFOLIO SUBMISSION COMPLIANT	YES	YES, WITH CAUTIONS/CONDITIONS (SEE NOTES SECTION)	NO

PORTFOLIO REFERRED TO CREDENTIALS COMMITTEE (NON-COMPLIANT)	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		

REMEDATION UNSUCCESSFUL	YES	NO
Communication with Registrant: Date		
Member's Portfolio and Audit submission file referred to Complaints Committee		

Assessor’s signature _____

Date: _____