

CCOA

Continuing Competence Program Manual



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CCOA

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Definitions

- 1. Throughout the continuing competence program manual:
 - a. **CCOA:** College of Chiropractors of Alberta;
 - b. chiropractor: regulated member registered with CCOA who holds an active practice permit;
 - competence: combined knowledge, skills, attitudes and judgment required to provide professional services;
 - d. competence committee: competence committee established under the Act;
 - e. **continuing Competence Program**: program of continuing competence provided for in Standards of Practice and Continuing Competence Program Manual;
 - f. **courtesy register**: courtesy register category of regulated members register;
 - g. **direct supervision:** authorized regulated member is present at and during performance of restricted activity;
 - h. **general register**: general register category of regulated members register;
 - Indirect Supervision: authorized regulated member be readily available for guidance and consultation, including being in same facility but not necessarily present at and during performance of restricted activity;
 - j. must: regulated member is required to comply as directed;
 - k. may: regulated member may exercise professional discretion;
 - l. patient: patient, or where applicable, patient's substitute decision maker;
 - m. **preceptor:** regulated member authorized to provide supervision during clinical practice and facilitates application of theory to practice for students;
 - n. **regulated member:** individual registered on a register referred to in Section 2 of Chiropractor Professions Regulation;
 - restricted activities: diagnostic and therapeutic procedures considered to be high risk activities identified under Health Professions Act that require specific professional authorization and competence to be performed safely;
 - p. **substitute decision-maker:** person other than patient who is legally authorized to decide on behalf of patient;
 - q. **student:** individual registered as a student in a Council on Chiropractic Education accredited Doctor of Chiropractic Program.
- 2. Unless the Continuing Competence Manual provides a more specific definition, terms used in the manual have the same meaning as in Schedule 2 to the Health Professions Act and the Chiropractors Profession Regulation.

Adopted by Council: June 2024



Introduction

The *Health Professions Act* (Act) requires a college council establish a continuing competence program. The Act Section 50(2) further clarifies a continuing competence program.

- a) must provide for regulated members or categories of regulated members to maintain competence and to enhance the provision of professional services; and
- b) may, if authorized by the Standards of Practice, provide for assessment of a regulated members competence or categories of regulated members.

Continuing Competence Program

Profession Governance

The Act designates the Council must establish a continuing competence program. For the successful establishment of the continuing competence program there is SP 10.0 Continuing Competence Program Requirements and the Continuing Competence Program Manual.

SP 10.0 Continuing Competence Program Requirements defines the standards the regulated members must fulfill to demonstrate a minimal level of performance. The standards are approved by Council after consultation with regulated members and the Minister of Health, per section 133 of the Act. The standards are the minimum level of professional behaviour expected of all regulated members registered in Alberta. Standards of Practice are enforceable under the Act and will be referenced in the management of complaints and discipline hearings and appeals.

The Continuing Competency Program Manual is adopted by Council and defines how the regulated members participate in the continuing competence program in fulfillment of the requirements of SP 10.0 Continuing Competence Program Requirements.

While competence is measured against minimal standards, ideally, regulated members should pursue continuing competency to enhance the delivery of professional services beyond the minimal acceptable level of performance.

Both the Standards of Practice and the Continuing Competence Program Manual are always available to regulated members, the public and the Minister.

College Administration

The Continuing Competence Program is administered by the Registrar and College staff based on the SP 10.0 Continuing Competence Program Requirements and the Continuing Competence Program Manual.

Role of the College

The College of Chiropractors of Alberta (CCOA) has established a continuing competence program that is compliant with the Act and includes.



- a) self-directed professional development; and
- b) assessment of a regulated member's competence through practice visits.

Self-directed professional development is accomplished and accounted for by regulated members attending College approved continuing competence programs. After the successful completion of these programs the regulated member submits earned competence credits to the college to demonstrate the completion of their requirements before the annual deadline for submission.

Practice visits, which are required under the Act, are typically conducted through the CCOA Self-Submission Practice Review Program. Practice visits are conducted by the Competence Committee to determine if regulated members are adhering to the standards of clinical practice.

Practice visits determine if a regulated member is meeting the minimal acceptable level of performance relative to the Standards of Practice, to provide feedback for improvement and when needed to provide direction on remediation.

The Standards of Practice not only define the standards that regulated members must adhere to in practice, but they also define the requirements for participation in the Continuing Competence Program. The Continuing Competence Program and the full participation of the regulated members are essential to the provision of safe and ethical care.

Role of the Competence Committee

Section 6 of the Act authorizes the competence committee to:

- make recommendations to the council on continuing competence requirements and the assessment of those requirements,
- may, if authorized by standards of practice, provide for assessments of regulated members' competence as part of the continuing competence program and conduct an assessment of regulated members' competence, and
- c) may undertake any other power or duty given to it under this Act or the bylaws.

Competence Committee Appointees

Clinical Advisors are appointed by the competence committee as authorized by Section 11 of the Act.

Role of the Regulated Member

Continuing Competence programs are essential for the provision of safe and ethical care, ensuring that as regulated members progress through their career, their knowledge, skills, attitudes, and judgment are aligned with current evidence. Regulated members continue professional development by participating in the College-established competence program.



Competence

The CCOA has adopted the Act's definition of competence. Competence means the combined knowledge, skills, attitudes and judgment required to provide professional services. The CCOA has adopted the following concepts to communicate what knowledge, skills, attitudes, and judgement represent in the context of chiropractic practice.

Knowledge

Knowledge is the learning and understanding of a body of information sufficient to comprehend and conceptualize the range of intellectual and practical issues that chiropractors can expect to encounter. Knowledge is necessary but not a sufficient foundation for competence. Knowledge covers a continuum from basic information that all chiropractors should know relative to the diagnosis and management of neurological and musculoskeletal conditions and their co-morbidities, to advanced knowledge obtained through continued learning and experience.

Skill

Skill is the ability to effectively apply knowledge in chiropractic practice. As with knowledge, skills cover a continuum from basic to advanced practice. Practice skills can be categorized as soft (personality) and hard (profession specific and technical) skills. Soft skills such as communication, leadership, professionalism, and time management are crucial to the patient and practice experience. Hard skills cover a range of activities such as performing an effective and appropriate history, assessment, and diagnosis. Hard skills include practice modalities such as manual therapies including spinal manipulation/adjustments or neuro-orthopedic examinations.

Attitude

Attitude refers to inclinations to act in a certain way to experienced situations; to see and interpret events according to certain predispositions; or to organize opinions into coherent and interrelated structures. Attitudes are indistinguishably related to values and behaviours. Values represent "ethical actions," and ethics hold a significant weighting in the factors that define attitude. Core values that all chiropractors' shares are Patient Autonomy, Non-malfeasance, Beneficence, Competence, and Veracity.

Judgement

Judgement involves knowing when to apply which skills under what circumstances. It also involves self-reflection regarding how a chiropractor's own values, attitudes, experiences, and social context influence their actions, interpretations, choices, and recommendations. Judgment involves a willingness to work hard to provide the best service possible for each and every patient, and in honestly evaluating one's own skills and seeking additional training when appropriate. Good judgment incorporates the intent of increasing the probability that activities will benefit (and not harm) the individuals, families, groups, and communities who entrust a chiropractor with their care.



Continuing Competence Program Rules

The Registrar must distribute the rules and any amendments to the established rules to the regulated members and provide copies on request to the Minister, regional health authorities and any person who requests them.

Self-Directed Learning Program Rules

- 1. The Council establishes the program rules, in accordance with this Continuing Competence Program Manual, governing the operation of the continuing competence program, including, but not restricted to, the following:
 - a) respecting the eligibility of an activity to qualify for program credits;
 - b) respecting the number of program credits to be earned for participating in each activity;
 - c) requiring members to participate in a specified number of different continuing competence activities;
 - d) requiring members to participate in continuing competence activities to maintain specific competencies;
 - e) limiting the number of program credits that can be earned from different continuing competence activities;
 - f) requiring members to participate in continuing competence activities to refresh specific competencies prior to renewal of their annual practice permit;
 - g) approving courses, continuing competence activities, study clubs, meetings, journal sessions, and self-study or distance education;
 - h) verifying attendance at and participation in activities that qualify for program credits;
 - i. other matters relating to the continuing competence program.
- 2. The Registrar and the Competence Committee may recommend rules or amendments to the rules to the Council.

Practice Visit Program Rules

- The Competence Committee is authorized to carry out assessments of a regulated members
 competence through practice visits and may, for the purpose of assessing continuing
 competence, select individual general members or groups of general members for a practice
 visit based on the criteria for selecting members for review developed by the Competence
 Committee and approved by the Council.
- 2. If the results of a practice visit are unsatisfactory, the Competence Committee may direct a regulated member to undertake one or more of the following actions within a specified period:
 - a) to complete specific continuing competence requirements within a specified time;
 - b) to complete any examinations, testing, assessment, training, education or counselling considered by the Competence Committee to be advisable;
 - c) to practise under the supervision of another regulated member on the general register;



- d) to prohibit the regulated member from supervising other regulated members or students providing professional services;
- e) to correct any problems identified in the practice visit;
- f) to submit to additional practice visits.



Self-Directed Professional Development

SP 10.0 Continuing Competence Program Requirements indicate that regulated members on the general register participate in self-directed professional development. Regulated members complete this requirement by completing Continuing Competence courses for credit that meet the criteria established in the program rules. In addition to self-directed professional development, Council has, or may establish, mandatory requirements that must be completed by regulated members on the general register of the college. These mandatory requirements may provide credits towards completion of the credit requirements.

Continuing Competence Course Credit

Regulated members on the general register must obtain a minimum of 24 credits annually to renew their practice permit. Competence credits must be submitted to the CCOA for audit annually by May 31 to ensure eligibility of regulated members to complete their annual practice permit renewal application. To be eligible for credit, the course must be completed in the current Continuing Competence Cycle which runs from June 1 to May 31 of the practice permit renewal year.

Members must ensure all courses for which certificates of completion or attendance are being submitted for Continuing Competence credit have been approved by the CCOA. Approved courses are available for review on the CCOA website here. As criteria for awarding credit may change, the CCOA does not guarantee that a course approved for credit once will be automatically granted approval again.

Failure to submit Continuing Competence certificates for approved courses by May 31 annually jeopardize regulated members' ability to complete their annual renewal application.

Seminar applications for consideration of credit in the current continuing competence period must be received at the CCOA no later than May 15 of each year.

Restrictions and Limitations

- 1. Members are not permitted to carry Continuing Competence credits from one Continuing Competence period to the next.
- 2. No course certificates of completion or attendance will be accepted for Continuing Competence credit more than once in any Continuing Competence period.
- 3. No extension will be granted to complete Continuing Competence requirements.

Restrictions and Limitations: Course Types		
Educational Option	Continuing Competence Credit Earned	Restrictions, Limitations, Additional Information
Basic Life Support (BLS) including Cardiopulmonary Resuscitation (CPR)	Annual completion of BLS will provide 4 CC credits annually.	Members are required to attain and maintain Basic Life Support (BLS) including Cardiopulmonary Resuscitation (CPR) certification. Temporary certificates are not accepted.



		Credits are applied only once per certification/ recertification.
Standard First Aid with CPR-C with AED	8 credits maximum per recertification	Members can obtain Standard First Aid with CPR-C with AED certification. Temporary certificates are not accepted.
BLS instructor certification	4 credits maximum per recertification	Credits are applied only once per certification/recertification.
Courses already accredited by MAINPRO® (Maintenance of Proficiency)	1 credit per hour	Material must be within the scope of practice.
Conference, course that is clinically relevant to chiropractic	1 credit per hour	Proof of attendance and conference syllabus are required

Restrictions and Limitations: Course Types		
Educational Option	Continuing Competence Credit Earned	Restrictions, Limitations, Additional Information
Distance/online seminar or course that is clinically relevant to chiropractic	Number of credits determined by provider	Evidence of successful completion must be provided by the participant.
Attendance at an academic presentation that is clinically relevant to chiropractic	1 credit per hour to a maximum of 6	Credits for the same presentation will only be awarded once in any CONTINUING COMPETENCE period. Proof of attendance is required.
Publication of a chiropractic, clinically relevant research	12 credits per published article	Credits awarded only in the CONTINUING COMPETENCE period in which the article was published.
paper in an CCOA-approved		Edits and revisions not eligible for credit.
peer reviewed journal		Can include chiropractic related articles or chiropractic- related original chapters in textbooks (with prior CCOA approval).
		The article , or demonstration of publication in a peer reviewed journal must be submitted
		If material is also presented (see below), credits are only available for publication or presentation, not both.
Provision of a research presentation that is clinically	1 credit per hour of presentation	Credits for the same presentation will only be awarded once in any CONTINUING COMPETENCE period.
relevant to chiropractic at an approved symposium or conference (podium or poster)		If material is also published (see above), credits are only available for publication or presentation, not both.



1 credit per hour	Evidence of successful completion of course work is required to receive credits. No credits offered for failed course work. No credits for projects, homework or preparation.
1 credit per hour to a maximum of 12	Must be taught at an accredited university or college.
1 credit per hour to a maximum of 6	Must be at an accredited university or college.
1 credit per hour	No application fee required for seminars/courses to maintain chiropractic fellowship status or certification. Certificates must be sent in with identification of which fellowship / course the certificates are for.
24 credits	Available to members with Researcher Status. Verification of research activities must be provided by faculty member of a recognized post-secondary institution approved by the CCOA.
Course Types	
Continuing Competence Credit Earned	Restrictions, Limitations, Additional Information
One credit per hour of participation	Participation to be verified by the CCEB.
	1 credit per hour to a maximum of 12 1 credit per hour to a maximum of 6 1 credit per hour 24 credits Course Types Continuing Competence Credit Earned One credit per hour of

Submission of Competence Requirements

Competence credits earned for activities above must be submitted annually as a digital document in PDF format by email to certificates@theccoa.ca by May 31 of each renewal year. Once the certificate has been verified as an approved Competence Course according to the program rules, and the number of hours earned have been verified, the credits will be applied to your College Competence profile in the members' center.

Seminar Application and Approval Process for CC Credits

To apply for CC credits for a seminar, the seminar provider or regulated member must submit for each course, session or module:



- CC Application form
- All requirements listed on the application
- For all CCOA fees see the CCOA Fees Webpage.
 - CCOA Seminar Application Fee
 - o Courtesy License Fee

Seminars/courses/conferences that meet the criteria below will be approved for CC credits. One CC credit will be awarded for each full hour of a seminar/course that:

- 1. is deemed to have chiropractic clinical relevance;
- 2. is within the scope of practice for chiropractors in Alberta;
- 3. supports the Standards of Practice, Code of Ethics, and Practice Directives of Alberta Chiropractors;
- 4. supports the delivery of chiropractic care and is specific to ongoing clinical competence; and/or
- 5. as approved by the Council of the CCOA as set out in the Council Approval of Therapeutic and Diagnostic Procedures.

CCOA members remain responsible for the appropriate application of information provided at approved continuing competence presentations that are within the scope of practice for Chiropractors in Alberta, while supporting CCOA Standards of Practice, Position Statements, and Code of Ethics.

As criteria for awarding credit may change, the CCOA does not guarantee that a seminar approved for credit once will be automatically granted approval again.

Council has provided the Registrar the discretion to interpret the meaning and the intent of criteria for competence credit eligibility in providing for competence credit.

Seminars approved during the current period can add more seminar dates within this period at no additional cost or application process, if there is no change of instructors or course content. The approval period ends May 31 of each year.

Educational Courtesy Registrations

Instructors not licensed in Alberta: when the instructor is a chiropractor who is licensed outside of Alberta, and the seminar relates to the instruction of a chiropractic technique or modality that includes restricted activities, the instructor must apply for a temporary courtesy registration.

One application per instructor must be submitted with the application for CC credit. Courtesy registrations only apply for the dates that instruction is provided. The Courtesy registration may be reinstated for sessional dates for the same course within a renewal year.



Mandatory Requirements Established by Council

Per section 1(c-d) of the Self-Directed Program Rules, Council has established that the following mandatory requirements must be completed by regulated members.

- 1. Basic Life Support (BLS) including Cardiopulmonary Resuscitation (CPR)
- Trauma informed care training
- 3. Record keeping course

Basic Life Support (BLS)

All regulated members are required to attain and maintain Basic Life Support (BLS) including Cardiopulmonary Resuscitation (CPR) training annually (at minimum).

Members are required to demonstrate by the annual continuing competence deadline of May 31, a current Basic Life Support (BLS) with Cardiopulmonary Resuscitation (CPR) certification that is in effect on July 1 (start of the practice permit year).

Basic Life Support (BLS) is the foundational course for healthcare professionals and trained first responders who provide care to patients in a wide variety of in-facility and prehospital settings. BLS is the cornerstone program for healthcare professionals.

Basic Life Support with Cardiopulmonary Resuscitation Quick Facts

Designed to build participant confidence in performing cardiopulmonary resuscitation (CPR) skills in a team environment for professionals with a duty to respond. Teaches the important steps to perform a rapid assessment, perform Basic Life Support (BLS) skills, and perform rapid defibrillation including use of an Automated External Defibrillator (AED).

Certificate requirements

Ensure you obtain at minimum BLS. Lesser certifications do not meet this requirement.

CC Credits

Annual completion of BLS will provide 4 CC credits annually.

To meet your membership renewal requirements and to be eligible for CC credits, your certificate(s) must evidence the following:

- Basic Life Support (BLS) including Cardiopulmonary Resuscitation (CPR)
- Date certificate was issued
- Certificate expiry date
- Certificate was issued by an accredited provider
- It is an official certificate

We will not accept:



- Certificates indicating that part of the course was taken you must submit the final certificate
 that shows the full course is complete (i.e., no interim/temporary certificates)
- Certificates that do not meet the above-listed criteria
- Certificates for a course that is completely online with no in-person training

How do I submit my BLS certificate?

Email your certificate in PDF format to: certificates@theccoa.ca

How long do I need to maintain certification?

You are required to maintain the BLS with CPR annually if you are a member of the CCOA.

Certification period

Annual certification required.

What if my CPR certificate expires before the last business day in June?

With each member's BLS with CPR certification expiring at different times throughout the calendar year, your requirement is to demonstrate annually by May 31 proof of valid BLS with CPR for July 1.

Trauma-informed care training

Trauma-informed care training is a mandatory requirement due by May 31 when Trauma Informed Training Required indicates 'Yes' in your Member's Centre Continuing Competence CC Summary. Training that is completed and submitted to the CCOA will expire in the third continuing competence cycle from when it was completed. This is a re-occurring requirement due every three years.

Trauma-informed Training is required under the *Health Professions Act*. This training is in consideration of patients that are dealing with a history of trauma.

CC Credits

2 CC credits will be awarded for the completion of this course once per renewal year with the submission of the certificate, or confirmation of completion to the CCOA.

How to complete your requirement

- The CCOA has developed specific resources and tools for regulated members on professional boundaries, shown in the resources section below. They should be reviewed and accessible prior to starting the assessment.
- 2. <u>Take the Assessment</u> (CCOA Trauma-Informed Care and Professional Boundaries Awareness and Implementation Assessment).

Note:

- A grade of 100% is required.
- The assessment follows an "open textbook exam" style. You will be prompted to click into various CCOA and external resources to read and find the answer to guestions.
- Your results will be automatically sent to the CCOA.



- You will receive an email from CCOA that confirms you have completed the assessment.
- Within 10 days, you can look under the Continuing Competence tab on your profile in the Members' Centre to see that two CC credits have been applied to your profile and that your trauma-informed training is no longer required.

The value of Trauma-informed Care training

Trauma-informed care recognizes that many of the patients who chiropractors provide care for will have a non-disclosed history of trauma. Professional boundaries create clarity in the chiropractor-patient relationship and protect patients. Chiropractors who establish and maintain clear professional boundaries do so to the benefit of themselves and their patients. When professional boundaries are not clear the risk of harm to patients including trauma from unprofessional conduct is elevated.

Competency in trauma-informed care is not a one-time effort. Like all professional competence, the skills, attributes, knowledge, understanding and application of trauma-informed care and professional boundaries should continue to progress throughout the professional career span of a practitioner.

Record-keeping

This course is worth four CC credits and completion is required by May 31 when record keeping requirement indicates yes in your Member's Centre Continuing Competence CC Summary.

Record-keeping that is completed and submitted to the CCOA will expire in the third continuing competence cycle from when it was completed. This is a re-occurring requirement due every three years.

CC credits will be awarded for the completion of this course once per renewal year with the submission of the certificate.

The CCOA record-keeping course was approved by a motion in Council to support the ongoing competency requirements of record-keeping. Working with CMCC, The Essentials of Record-Keeping 63765 course has been created to reflect not only core requirements but best practices when it comes to record-keeping.

Before you begin

Please be sure to complete this course on a computer, not on a mobile device. Before you can see "Record Keeping" in the CMCC online catalog and self-enroll in it, you must first log into your account on the CMCC learning system CEconnect. Please follow instructions A or B below, depending on whether you already have a CEconnect account or not.

A: If you have taken another CMCC Continuing Education course before, you already have a learner account on the CMCC CEconnect website. Do not create a duplicate account! Please log into your existing account and self-enroll by following these instructions:

1. Go to the <u>CEconnect</u> website.



- 2. Login to your account. (if you forgot your password you can create a new one by clicking forgot password and following the on-screen instructions).
- 3. Click the CATALOG button and find "Record Keeping" (You can search for the course in the catalog by typing any part of the name into the search tool on the left margin).
- 4. Click the course to add it to the shopping cart.
- 5. Click the shopping cart symbol top right and follow the onscreen instructions to complete the transaction, using your credit card.
- 6. Once complete you will receive one email confirming your enrollment and another with a receipt for the transaction.
- 7. Go back to your dashboard and click My Courses
- 8. "Record Keeping" will be displayed. Click it to start.
- 9. Once started you may pause at any time, exit the system and return later to log in and resume from where you paused.

B: If you have not taken a CMCC Continuing Education course before, then you DO NOT have a learner account on the CMCC CEconnect website, follow these instructions to create your learner account via SIGN UP, and then self-enroll:

- 1. Click this hyperlink
- 2. The CEconnect SIGNUP screen will be displayed. To create your new learner account, complete all fields and click Sign Up when done.
- 3. You will then be logged in to your new learner account and your personal dashboard will be displayed. (In a secure place, make note of your new USERNAME and PASSWORD!).
- 4. Click the CATALOG button and find "Record Keeping". (You can search for the course in the catalog by typing any part of the name into the search tool on the left margin).
- 5. Click the course to add it to the shopping cart.
- 6. Click the shopping cart symbol top right and follow the onscreen instructions to complete the transaction, using your credit card.
- 7. Once complete you will receive one email confirming your enrollment and another with a receipt for the transaction.
- 8. Go back to your dashboard and click MY COURSES.
- 9. "Record Keeping" will be displayed. Click it to start.
- 10. Once started you may pause at any time, exit the system and return later to log in and resume from where you paused.

If you require assistance, contact the CMCC Continuing Education helpdesk at ce@cmcc.ca. You will be contacted by helpdesk personnel within 24 hours during weekday business hours, Eastern Time.

Once you complete the course, a certificate of completion will be automatically created and posted to your TRANSCRIPT on the CEconnect system. You **must** download the certificate for your records. To notify the CCOA and confirm course completion, please email a pdf copy of the certificate you downloaded to <u>certificates@theccoa.ca</u>

Record-Keeping Course Fees

Members will be required to enroll and pay an annual fee of \$52.00 to CMCC to complete "Record Keeping".



Please note that this fee is set and collected by CMCC.

CC Credits

Completion of "Record Keeping" will earn each member 4 CC credits per renewal cycle.

Practice Visits and the Assessment of a Regulated Member's Competence

Practice visits are authorized in Section 51 of the Act and CCOA Standard of Practice 10.

What is a practice visit?

A practice visit is a requirement of the Health Professions Act (HPA) and Standards of Practice that the CCOA accomplishes through:

- 1. self-submission practice review,
- 2. professional communication review, and
- 3. practice visits as described in Section 51(3) of the Act.

All facilities and members of the chiropractic profession must meet the necessary requirements as set out by the CCOA and all practices and procedures must be consistent with the requirements of the HPA and CCOA Standards of Practice, Code of Ethics, Bylaws, Directives and Administrative Policies.

Self-submission practice review

How and when to complete your self-submission

You will receive a notice reminder by email indicating when your practice review is due and which self-submission package you need to use. Download the appropriate package from the Resources section and complete as indicated.

At a minimum, your practice visit (self-submission practice review) will occur every three to five years. Regulated members who have been with the CCOA one year or less must complete their self-submission before the end of their first year of registration. Note: the email notice is a courtesy reminder; self-submission deadlines are always listed under the Practice Review tab in your Member Profile on www.theccoa.ca (member login required).

If you will be required to complete a practice visit other than the type identified above, you will be provided written notice from the CCOA and the necessary documents. For example, remedial reviews typically occur within one year after the completion of the last review.

What are the contents of a self-submission?

You will need to provide the following information in your self-submission:

- 1. Member information and Clinic Overview
- 2. Declaration
- 3. Clinic layout
- 4. Clinic photographs



- 5. Diagnostic equipment
- 6. Clinic stationary
- 7. Accounting & Billing
- 8. Financial documents
- 9. Treatment record abbreviations
- 10. Patient files (record-keeping competency)
 - a) The primary focus of the review is your record-keeping. The Competency Committee, via a Clinical Advisor, will offer the most feedback on this section of your selfsubmission.
 - b) While you are gathering your patient files, use the CCOA Record-keeping Requirements Guide as a reference. The guide specifies exactly what the clinical advisor is looking for when reviewing your records.

How the CCOA Record-keeping Requirements Guide helps you meet practice standards

The CCOA Record-keeping Requirements Guide identifies what the minimally acceptable levels of performance are required of regulated members. It also specifies how the Competence Committee reviews your submission **and** provides areas of improvement based on their feedback in your results letter. Refer to the guide before and after your practice review and to help you meet daily record-keeping standards.

How to apply the guide in your practice:

- 1. Read the guide.
- 2. Compare your clinical practice and decision-making against the direction in the guide.
- 3. Scrutinize your clinical records against the guide.
- 4. Make any changes necessary to address observed deficiencies.

What types of self-submission practice reviews does the CCOA conduct? Self-Submission Practice Review

Standard practice visits are conducted primarily through a self-submission practice review process. The self-submission practice review process was developed by the CCOA to ensure minimum standards of practice and support quality assurance in our profession. The primary focus of this review is professional quality record-keeping.

Remedial Practice Visit

If regulated members are unsuccessful in their standard practice visit, a remedial practice visit will be carried out as soon as reasonably possible at the request of the Competence Committee or as the result of a discipline order. Supplemental practice visits are conducted primarily through a self-submission practice review process.

Second Practice visit (follows all remedial practice visits)

If a regulated member successfully completes their remedial practice visit, then a second practice visit is conducted primarily through a self-submission process. Second practice visits are conducted primarily through a self-submission practice review process.



Remedial Practice Visit with Coaching

If a regulated member fails a remedial practice visit, they will have a second remedial practice review, with the addition of direct communication with the Competence Committee and any delegate of that committee. The regulated member will also be responsible to submit a self-submission practice review and a self-assessment of their record-keeping practices and their steps to correct deficiencies in their practice.

On-Site Practice Visit

An unsuccessful remedial practice visit with coaching will result in an on-site practice visit. The regulated member will be required to submit a self-assessment of their record keeping practices and their steps to correct deficiencies. This self-assessment will be discussed and audited at the onsite practice visit. The on-site peer practice visit will consist of a member of the Competence Committee, or someone appointed by them to attend in person the clinic of the regulated member. The peer reviewer will observe the clinic, interview staff, and audit the self-assessment submitted.

Alternate assessment of the Requirement for Practice Review

Regulated CCOA members who are solely practicing in another regulated jurisdiction(s) must provide the CCOA their most recent peer assessment results from their other regulated jurisdiction(s). Regulated members who practice primarily in other jurisdictions are required to provide other CCOA self-submissions or documentation as determined by the Competence Committee or Registrar.

Practice Review results reporting

Practice review results are reported to the regulated member and the Registrar by the Competence Committee within 90 days. That date is noted in the member's profile under the Competence tab as the completed date.

The Competence Committee reporting includes:

- The practice visit outcomes (see table below)
- Any follow-up competence activity required by the regulated member
- If information obtained from the practice visit has been referred to the Complaints Director

The Competence Committee may:

- Ask a regulated member to complete specific continuing competence requirements within a specified time.
- Ask a regulated member to complete any examinations, testing, assessment, education or counselling considered by the Competence Committee to be advisable.
- Ask a regulated member to practice under the supervision of another general member; or prohibit a regulated member from supervising other regulated members or students providing professional services.

What should you do once you receive your results? The results letter serves two purposes:



- 1. To provide the required reporting to you of what was observed relative to the Standards of Practice as interpreted by the CCOA Record-Keeping Requirements Guide.
- 2. Recommendations made by the Clinical Advisor in the comments section that you need to use to improve your record-keeping combined with using the guide to make changes in your practice.

How to understand your results

The Results from the Practice v Reported	Interpretation	Results Follow-Up by Regulated Member
Met Requirements	The practice-visit result letter demonstrated appropriate record keeping, clinical decision making in applying the Standards of Practice.	No follow-up required. Seek out self-directed professional development that continues to lead to mastery in clinical practice and record-
Met Requirements with Comments	The practice-visit result letter demonstrated appropriate record keeping and clinical decision making in applying the Standards of Practice. The Competence Committee identified practices that require attention to continue to progress in your clinical competency.	keeping. Evaluate the comments and adapt your record keeping and clinical practice based on the comments provided.
Met Requirements with Concerns	The practice-visit result letter identified you barely met the minimal standard of practice. There are concerns in your practice identified by the Competence Committee that should be addressed in your record keeping or clinical decision making in applying Standards of Practice.	Evaluate your clinical records and incorporate the changes recommended by the Competency Committee. Seek out self-directed professional development that builds clinical decision making relative to the Standards of Practice in practice areas of concern identified by the Competence Committee.
The Results from the Practice v	isit are Unsatisfactory	competence committee.
Reported	Interpretation	Results Follow-Up



Did Not Meet Requirements	The practice-visit result letter identified practice activity that the Competency Committee has determined does not meet requirements for record keeping or clinical decision making in applying the Standards of Practice.	Immediate change in the deficiencies identified by the Competence Committee must be made. After you read your results letter, you should determine the changes that are needed, including, but not limited to the following actions.
		Change your record keeping by incorporating the changes recommended by the Clinical Advisor.
		Evaluate your competency relative to activities identified in the results letter to determine
		which continuing competence courses you need to meet the Standards.

Professional communication program

The CCOA professional communication program is a competence-based program authorized in the Act, Standards of Practice, and this manual. Communication is an essential competency for chiropractors required in all aspects of professional practice. There is an expectation that regulated members self assess and improve their communication competency throughout their career. The Competence Committee conducts assessments of communication through a professional communication review.

Regulated members have an ethical obligation to be truthful and forthright in all professional matters by fully disclosing and not misrepresenting information. There is an ethical obligation to ensure professional communications do not harm the public while supporting the professions self-regulation.

How the CCOA helps you meet professional communication requirements The professional communication performance requirements are established in the Act Section 102 (Advertising). The CCOA established performance requirements in the Standards of Practice (SP 1.0, 1.1, 1.2 and 1.3) and Code of Ethics. Professional communication performance requirements are informed by the CCOA Professional Communication Directive.

How to apply the professional communications requirements in your practice:

1. Be personally responsible for the ethical communication that you make or allow to be made on your behalf.



- 2. Be informed of legislated and CCOA requirements.
- 3. Be intentional and proactively examine/audit your professional communication.
- 4. Be responsive and immediately correct identified performance deficiencies.
- 5. Maintain a record of your audits and corrections as a demonstration of your professional commitment to ethical professional communication.

How and when to complete your professional communication review

The CCOA Standard of Practice 10.0 Continuing Competence Program Requirements, section 3, indicates that "a regulated member on the general register of the College must participate in the practice visit program for the assessment of a regulated member's competence, conducted by the Competence Committee, as established by Council, and published in the Continuing Competence Program Manual."

The Competence Committee is authorized to conduct professional communication reviews within the practice visit program for the assessment of a regulated member's competence.

Regulated members will complete professional communication reviews when directed to do so by the Competence Committee.

What types of professional communication assessments does the CCOA conduct?

Professional communication self-review

CCOA staff provide notification to a regulated member when the professional communication program tool, Competency Committee, or CCOA staff identify communication or advertising that does not meet requirements.

The notice to the regulated member will identify the professional communication requirement(s) not met, and direction to complete a professional communication self-review. Regulated members will be provided instructions, tools, and resources to complete their self-review.

The professional communication self-review will be conducted by the regulated member, and the regulated member will provide the required reporting of their self-review to the Competence Committee.

Competence Committee communication review

The Competence Committee directs a regulated member to participate in a Competence Committee professional communication review when:

- The professional communication program tool, Competence Committee, or CCOA staff identify communication or advertising that does not meet requirements, and the regulated member has completed a professional communication self-review; or
- b. A person from the public (person) reports a professional communication concern that does not meet requirements and the person does not want to initiate a formal complaint under Part IV of the Act.



The Competence Committee communication will be conducted by the Competence Committee, or a person appointed under Section 11 of the Act.

What actions need to be completed for the professional communication review

Professional communication self-review

The professional communication self-review includes the following actions to be completed by the regulated member:

- a. An acknowledgement of the provided professional communication content that does not meet requirements.
- b. A complete review of all professional communication to identify other communication/advertising that may not meet requirements.
- c. The action that the regulated member has taken to correct the provided and self-review content that does not meet requirements.
- d. An acknowledgment by the regulated member regarding their ethical responsibility to meet professional communication requirements.
- e. The regulated member's written plan and commitment to manage professional communication after the completed self-review.

The record of the professional communication self-review as instructed in the review notice must be provided to the Competence Committee, and that record will be retained by the CCOA.

Competence Committee professional communication review

The Competence Committee professional communication review includes the following actions to be completed by the Competence Committee.

- a. The Competence Committee will direct the regulated member that they must participate in a Competence Committee professional communication review.
- b. The Competence Committee or a person appointed under Section 11 of the Act will complete the professional communication review.
- c. The regulated member will be consulted during the professional communication review.

Professional communication review results reporting

Professional communication review results are reported to the regulated member and the Registrar by the Competence Committee within 90 days of a completed review.

The Competence Committee reporting includes:

- The practice visit results (see table below)
- Any follow-up competence activity required by the regulated member
- If information obtained from the practice visit has been referred to the Complaints Director



The Competence Committee may:

- Require a regulated member to complete specific continuing competence requirements within a specified time.
- Require a regulated member to complete any examinations, testing, assessment, education or counselling considered by the Competence Committee to be advisable.
- Require a regulated member to practice under the supervision of another general member; or prohibit a regulated member from supervising other regulated members or students providing professional services.

How to understand your professional communication review results

The results from the professional communication review are satisfactory			
Reported	Interpretation	Results Follow-Up by Regulated	
		Member	
Satisfactory	The professional	No follow-up required.	
	communication review		
	demonstrated appropriate	Continue to demonstrate	
	competence.	satisfactory performance of	
		professional communication.	
Satisfactory with comments	The professional	Evaluate the comments and	
	communication review	adapt your record keeping and	
	demonstrated appropriate	clinical practice based on the	
	competence, and the	comments provided.	
	competence committee		
	identified areas that the	Seek out self-directed	
	regulated can improve their	professional development that	
	professional communication	leads to mastery of professional	
	performance.	communications.	
The results from the professiona	communication review are unsat	isfactory	
Reported	Interpretation	Results Follow-Up	
Unsatisfactory	The professional	The competence committee will	
	communication review	develop a competence	
	demonstrated competence	development plan for the	
	issues, and the competence	regulated member to	
	committee identified	demonstrate competent	
	requirements that must be met	communication.	
	to satisfy the competency		
	committee that the regulated	The regulated member must	
	member perform competent	meet the requirements in their	
	communication.	competence development plan	
		within established timelines.	



Fees for the professional communication program review

The practice review supplemental fee from the CCOA fee schedule applies to a regulated member who is directed by the Competence Committee to participate in a Competence Committee professional communication review.

For regulated members that receive an unsatisfactory result for their professional communication review, there is an additional fee published in the CCOA fee schedule (competence development plan) for the Competence Committee to manage unsatisfactory results.

Regulated members will pay the cost when obtaining specific continuing competence requirements, or completing any examinations, testing, assessment, education or counselling considered by the Competence Committee to be advisable in the competence development plan.

X-Ray Practitioner Quality Assurance Program

Introduction

The X-ray Quality Assurance Program (QAP) review process was developed by the College of Chiropractors of Alberta (CCOA) to ensure minimum standards of practice and support quality assurance in our profession. The QAP is a competence assessment of regulated members who operate X-ray in X-ray facilities. All facilities using X-ray must meet the necessary requirements to register their equipment. Facility owners and operators must, as set out by the CCOA, operate X-ray equipment with practices and procedures consistent with the requirements of the CCOA QAP and Occupational Health and Safety legislation.

X-ray QAP - Requirements and Definitions

The requirements and definitions for the minimal level of performance are defined in the X-ray Quality Assurance Program Requirements and Definitions guide. This guide will be referenced in the review of all X-ray QAPs.

X-ray QAP Review Process and Outcomes

The following is a brief description of the review process and the possible outcomes of a Quality Assurance Program (QAP) review. A Clinical Advisor reviews the QAP self-submission and returns it to the CCOA, where it is processed into a cohesive results report. This report is then forwarded to the member, along with the submitted X-rays for return (if film). The report will outline any identified issues and next step(s):

- If the regulated member/operator meets the minimum performance level (MPL), they are informed of this, and the next review is scheduled in approximately two to three years.
- Non-critical deficiencies identified in the review may result in the requirement for the member to submit amended forms, additional films, etc., that evidence the member has made



- appropriate changes to meet CCOA requirements regarding quality assurance. The remedial process is not engaged.
- If the member fails to meet the MPL, the remediation process ensues. This process entails the submission of one or two further re-reviews demonstrating remediation of the issues identified in the initial review. The number of re-reviews scheduled depends upon the nature of the failure to meet standards, and whether or not evidence of remediation is proved upon the first re-review.
- Each re-review is staggered at approximately two-month intervals after the result of the first or subsequent review is communicated. Members bear the cost for each re-review. The fee is published on the CCOA Fees Webpage.

Should the member fail the second re-review, the following outcomes are described below:

Owner-operator Suspension

- If the operator is also the x-ray facility owner, a written directive will be issued suspending the registration permit, thus prohibiting use of the X-ray facility for all operators, i.e., no X-rays may be taken by any individual at that facility.
- To receive approval to return to use of the facility, proof must be provided that the owneroperator has taken and passed a course, approved by the Registrar, on how to take appropriate diagnostic quality images and maintain a safe X-ray facility.
- If proof of remediation training is not presented to the CCOA within 90 days, the facility permit may be cancelled.
- If the facility's registration is cancelled, the owner must still meet the requirements and will be required to reinstate the facility's registration, along with submission of proof of remediation training.

Operator Suspension

- If the operator is not the owner, the owner of the facility will be notified that the operator's X-ray privileges have been suspended. The owner is accountable for the enforcement of this suspension.
- To be reinstated, proof must be provided that the suspended operator has taken and passed a course approved by the Registrar, on how to take appropriate diagnostic quality images and maintain a safe X-ray facility.

Due date, submission information and costs

Due date

Your self-submission is due at the CCOA office on the due date indicated in the notice email. Packages not received by the due date are considered late, regardless of postmark.



Submission information

Print this document, fill it out and submit it as a hard copy along with the relevant forms. Electronic submissions, with the exception of digital radiographs on CD/DVD/USB, are not accepted.

The CCOA will return submitted films with the results letter. Digital radiographs on CD/DVD will not be returned and will be securely destroyed after the review is complete.

You must send your self-submission via trackable means to ensure your submission does not get lost during transit and to ensure patient privacy.

QAP costs

The cost of an X-ray QAP review self-submission is published on the <u>CCOA Fees Webpage</u>. After the conclusion of the review, an invoice will be posted to your online profile and a notification email will be sent when the invoice is available to be paid. Payments sent prior to invoicing will be returned to the sender.

Use of an X-ray facility while operator privileges are suspended constitutes unprofessional conduct and may be referred to the Complaints Director.