

Report on the Quality Assurance and Continuing Competency Registrant Collaboration Study April/ May 2019

Introduction

The College of Physical Therapists of British Columbia (the College) wanted input from registrants about the College Quality Assurance and Continuing Competency program. We contracted itracks, a Canadian-based research firm, to conduct consultations in April and May 2019. 131 physical therapist registrants from across the province participated via online focus groups. Different terms are used related to quality assurance and continuing competence; for the purpose of this summary 'quality programs' is used.

This is a summary of the feedback gathered during the consultations. If you have questions or comments, please contact gap@cptbc.org.

Key findings

Quality of practice

- Accountability for quality of practice should be primarily the responsibility of the physical therapist; with some registrants supporting others in sharing this responsibility (employers, supervisors, peers, professional associations, educators and the regulator).
- Physical therapy services were viewed as relatively low risk.
- All registrants should have the same competency requirements.
- The College should provide support to achieve these if needed.

Continuing professional development

- 98% of respondents pursue opportunities for formal and informal continuing professional development (CPD) (reading/ learning 92%, support from colleagues to solve clinical problems 85%, courses 77%.)

Assessment methods

- Respondents want quality programs that are flexible, applicable to diverse practice areas, efficient to implement/ participate in, provide specific feedback and proven effective at improving competency and facilitating skill development of all registrants.
- A quality program should advance competency in a large percentage of registrants rather than focusing on identifying the small percentage of registrants who need support.
- Respondents suggest the following mechanisms to provide evidence of quality practice:
Continuing professional development (CPD) portfolio:
 - 71% rated 1st or 2nd: portfolio-based assessment, documenting learning guided by self-assessment, reflection and a learning plan;

Blended model:

- 71% rated 1st or 2nd: flexible combination of methods including continuing education hours, a CPD portfolio-based assessment, the Annual Self Report (ASR), peer assessments and/or chart stimulated recall;

Mandatory continuing education (CE) credits:

- 36% rated 1st or 2nd;

Quality improvement activities:

- opportunities for PTs to improve their practice, flexible methods that respect diversity of practice;

Peer reviews:

- could be considered as a component to create accountability, identify deficiencies, facilitate knowledge translation and prevent isolation.

Existing Quality Programs (RCA and ASR)

- Respondent feedback was mixed regarding the Registrant Competence Assessment (RCA). Some felt it is not an acceptable method to assess the continuing competence of registrants. Others felt it is, however aspects of it are undesirable (e.g. closed book, proctored, length, limited contexts to choose from, and technical problems). Suggestions to improve the RCA include:
 - more practice context options,
 - provision of immediate feedback and learning tools, and
 - an open book/ discussion-based format to encourage collaboration and knowledge sharing.
- Suggestions to improve the Annual Self Report (ASR):
 - change the content over time,
 - include cultural sensitivity, identification of warning signs, communication skills.

This consultation provides valuable information to the Quality Assurance Committee. It will provide input on discussions as they reflect on the Quality Assurance Program and how it should evolve.