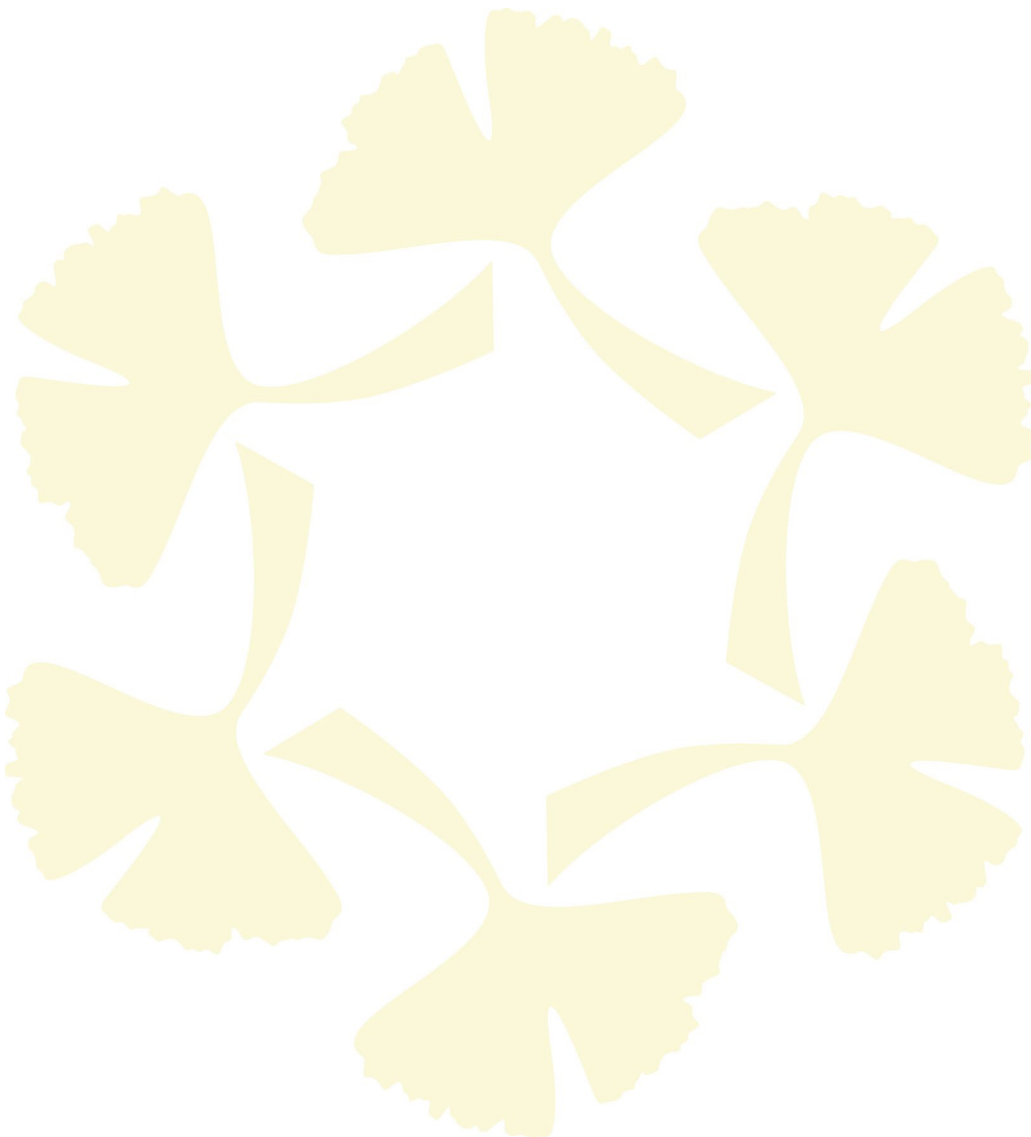




The College of Naturopaths of Ontario

# Peer and Practice Assessment Handbook



## Introduction

Upon registering with the College of Naturopaths of Ontario (the College), Registrants have the authority to use the title Naturopathic Doctor and to practise naturopathy in Ontario. This comes with important responsibilities, including the ability to demonstrate an understanding of the standards of the profession, and compliance with the regulations, standards of practice, policies, and guidelines of the College. Peer and practice assessments, as a component of the College's Quality Assurance (QA) Program, play a key role in ensuring Registrants are meeting these responsibilities. With these assessments, Registrants undergo a review of their knowledge and performance with a peer assessor. Other elements of the QA Program include a self-assessment, and continuing education and professional development (ongoing education).

The Peer and Practice Assessment Program is designed to be transparent, educational and supportive. College-trained assessors aim to provide a positive learning experience that is relevant to each Registrant's practice. During the peer and practice assessments, assessors engage in a dialogue with Registrants and help them identify areas of strength and opportunities for improvement. The College recognizes that most Registrants practise safely, competently and ethically.

Each year, the College randomly selects up to 20% of General Class Registrants to participate in a peer and practice assessment. New Registrants of the College will be exempt from the peer and practice assessment program for their first three years of registration.

All peer and practice assessments are conducted virtually. The assessment includes a review of specific aspects of the Registrant's premises, record keeping practises, certain College standards and guidelines, their professional portfolio and an in-depth clinical discussion of one patient chart.

This handbook has been prepared to inform you of what to expect before, during and after your peer and practice assessment.

## Before the Assessment

The College will notify you by email that you have been randomly selected for a peer and practice assessment. The notification outlines the pre-assessment information to be provided, including worksheets that you will need to complete and submit to the College as well as the fee owing for the peer and practice assessment.

As authorized in the College's by-laws, the cost for a randomly selected peer and practice assessment is \$25 (+ HST). For a registrant who requests that the assessment be conducted in person there is a \$75 (+ HST) surcharge. The fee for a peer and practice assessment that has been ordered by the College is \$750 (+ HST).

You must submit one patient record with all identifying information redacted. A patient record includes the patient's file, and the corresponding appointment and financial records.

Registrants selected for a peer and practice assessment may seek an extension if they are currently on parental leave, are seriously ill, are on a leave-of-absence or have other reasons or extenuating circumstances. All extension requests are reviewed by the QA Committee on a case-by-case basis.

If seeking an extension, you must complete and submit the [Extension Request form](#) within 30 days of being notified of your selection for an assessment, unless there are extenuating circumstances that affect your ability to submit the application within this timeframe.

### **Pre-assessment Information and Declaration of a Conflict of Interest**

The online [Pre-assessment Information and Declaration of a Conflict of Interest form](#) includes questions related to your practice (e.g., type of practice, controlled acts performed, etc.) and provides you an opportunity to inform the College of any circumstances that you feel demonstrate a conflict of interest with a potential assessor.

There is the possibility that you may have had some form of contact with a potential assessor. Minimal or collegial contact between an assessor and a Registrant is acceptable and is unlikely to result in a conflict of interest.

A conflict of interest exists where a reasonable person would conclude that the assessor's professional, personal or financial relationship to the Registrant may affect their judgment or the discharge of their duties on behalf of the College. A conflict of interest may be real or perceived, actual, or potential, direct or indirect. Examples of a conflict of interest could exist with personal relationships (ongoing or in the past), professional relationships (shared practices, business arrangements, etc.), and an existing relationship where one person is in a position of authority over another. Each case of a potential conflict of interest is evaluated on its own set of circumstances.

The information you give in the Pre-assessment Information and Declaration of a Conflict of Interest form:

- provides the College with the most current information about your practice,
- assists the College in matching you with the most appropriate assessor, and
- familiarizes the assessor with you and your practice.

This online form must be completed and submitted within 14 days of being notified of selection for a peer and practice assessment.

### **Peer and Practice Assessment Worksheets**

To facilitate discussion with the assessor, Registrants are required to complete some components of the peer and practice assessment ahead of time and submit them to the College. Completed worksheets are provided to the assessor prior to the peer and practice assessment. During the assessment, the assessor goes over any comments, and discusses what has been done well and what areas may need improvement.

The worksheets are provided in the email notifying the Registrant that they have been selected for a peer and practice assessment. They are to be submitted to the College, along with any required accompanying documents (please refer to the Documents to be Submitted section of this handbook for the full list), within 45 days of the date of notification.

[Premises Review Worksheet](#)

If you have a physical practice location, you will be required to complete the [Premises Review Worksheet](#) as it relates to your primary place of practice, and indicate if, in your opinion, the criteria on the worksheet have been met. You may also provide details as to how you have met the criteria or why certain criteria have not been met.

If you do not have a physical practice location, but provide home-visits, you will need to complete only the sections of the Worksheet pertaining to infection control and equipment, as it relates to home-visits, and storage and maintenance of patient records.

If you only provide care via telepractice, you will need to complete only the section of the Worksheet pertaining to the storage and maintenance of patient records.

#### Patient Files Review Worksheet

To complete the [Patient Files Review Worksheet](#), select five patient files (no more than a year old) that best represent the scope and breadth of your practice. All files must include at minimum the initial visit and two follow up visits. If you perform IVIT procedures and/or prescribe, you must choose at least one file that includes these controlled acts.

This worksheet requires you to review each of the selected files to assess how well your record keeping practices comply with expectations set out in the [Standard of Practice for Record Keeping](#) and indicate whether, in your opinion, the criteria have or have not been met. You may also include comments to provide information explaining your responses.

#### Professional Portfolio Review Worksheet

Every Registrant is required to maintain a professional portfolio. The [Professional Portfolio Review Worksheet](#) includes the College's requirements related to your self-assessment, continuing education and professional development documents. When completing the Worksheet, you will be asked to indicate whether, in your opinion, the criteria have or have not been met. If you are missing certain documents, you may provide information explaining the reasons why.

#### Standards of Practice Review Worksheet

The QA Committee may select up to 10 standards of practice, policies, regulations and/or guidelines to be reviewed as one component of the peer and practice assessment. The [Standards of Practice Review Worksheet](#) includes questions about the documents that have been chosen for the current peer and practice assessment cycle. You will be expected to read the chosen documents and complete the form, answering the questions to the best of your ability.

#### Chart Stimulated Recall Worksheet

This component of the peer and practice assessment is designed to help Registrants recall a particular patient experience, explain the thought processes used, and demonstrate their clinical reasoning and reflection that occurred.

You will receive the [Chart Stimulated Review Worksheet](#) to review and reflect so that you're familiar with the topics to be discussed with the assessor during the assessment. Do **not** complete this Worksheet prior to the peer and practice assessment.

#### Non-clinical Peer and Practice Assessment

Any Registrant who has a non-clinical term, condition and limitation (TCL) placed on their certificate of registration will undergo an assessment that has been modified from what a Registrant who is in clinical practice will undergo. The non-clinical assessment includes a review of the Registrant's professional portfolio and their knowledge of the College's standards of practice, policies, regulations and/or guidelines.

The intention of this assessment is to provide non-clinical Registrants with an opportunity to have a discussion with a peer to identify areas of strength in their understanding of the College's standards of practice, etc., as well as areas that could be improved. While some of the standards of practice may not directly apply to their role in the profession, it is still expected that they are fully aware of them.

If you have a non-clinical TCL on your certificate of registration, you will be provided with the Professional Portfolio Worksheet (see above) and the Standards of Practice Worksheet (see above) to complete and submit to the College prior to your assessment.

### **Documents to be Submitted**

Clinical peer and practice assessment:

- one complete, redacted patient record (a complete patient record includes the patient's file, appointment, and financial record), such that the record is identified only by the patient's initials,
- completed Premises Review Worksheet,
- completed Patient Files Review Worksheet,
- completed Professional Portfolio Review Worksheet, and
- completed Standards of Practice Review Worksheet.

Non-clinical peer and practice assessment:

- completed Professional Portfolio Review Worksheet, and
- completed Standards of Practice Review Worksheet.

### **Scheduling the Peer and Practice Assessment**

Once the College has received your Pre-assessment Information and Declaration of a Conflict of Interest form, as well as all assessors' Declaration of a Conflict of Interest forms, you will be matched to the most appropriate assessor and notified by email of your assigned assessor.

The assessor will contact you directly to arrange the virtual peer and practice assessment to ensure this is scheduled for a mutually convenient day and time. It is expected that the assessment will be done within approximately six months from the date of notification of being selected for an assessment. You will also be provided with the information needed to join the online peer and practice assessment.

Prior to the assessment, the assessor will review your submitted worksheets and complete the Patient Files Review Worksheet using the patient file provided.

## **During the Assessment**

The virtual peer and practice assessment will take approximately 2-3 hours to complete.

During the assessment, you will need to have the following documents on hand for your discussion with the assessor:

- the chart to be discussed for the Patient Files Review and the Chart Stimulated Recall,
- professional portfolio for the Professional Portfolio Review, and
- drug and substances inventory log(s) (if applicable).

You will be expected to be in your primary practice location at the time of the peer and practice assessment to allow you to show the assessor your clinic and answer any questions they may have about your Premises Review Worksheet.

The assessor will review each of your worksheets, asking questions to clarify the information you provided, and to facilitate a discussion. They will also point out what was done well and what areas are deficient and thus in need of improvement. The assessor will have reviewed the patient record provided and will compare their assessment of your record keeping practices with your self-assessment. This patient file will also be used for the discussion related to the Chart Stimulated Recall Worksheet. The assessor may have questions about your record keeping practices related to your inventory records. As the Professional Portfolio Worksheet is discussed the assessor will ask to see some documents related to your self-assessment and continuing education activities.

At any time during the assessment, you are free to ask questions and provide information that will help the assessor determine how well you have met the criteria contained in the worksheets.

The assessor will go over their observations with you and will provide you with an overview of what they will include in their Assessor's Report, which is then submitted to the College. The report will outline their observations of your knowledge, skill, and judgment.

## After the Assessment

The results of a peer and practice assessment are confidential and are only shared with the Registrant, Professional Practice Department staff and the QA Committee. This information is not shared with other staff at the College, other Committees, or employers.

The College will send you a copy of the Assessor's Report to be filed in your professional portfolio. You will also receive a link to the online Registrant Peer and Practice Assessment Feedback form to complete and submit to the College. The form provides you with the opportunity to evaluate the peer and practice assessment process and the skills of your assessor. Your feedback is entirely confidential, and your name will not be shared should you have had any negative feedback for the assessor or staff of the College. Your opinion and those of other participants help the College better understand how it can improve the program to be more beneficial for Registrants in the future.

## QA Committee's Evaluation of the Assessment

Depending on the information contained in the Assessor's Report, you will receive a letter to notify you of one of the following assessment outcomes:

1. There were no areas identified that need improvement and nothing further will be required of you regarding the peer and practice assessment.
2. There were areas identified that need minor improvement. You may receive recommendations as to how you can make improvements in these areas; however, nothing further will be required of you regarding the peer and practice assessment. Any actions you take to address these identified minor issues will be reviewed during your next assessment.

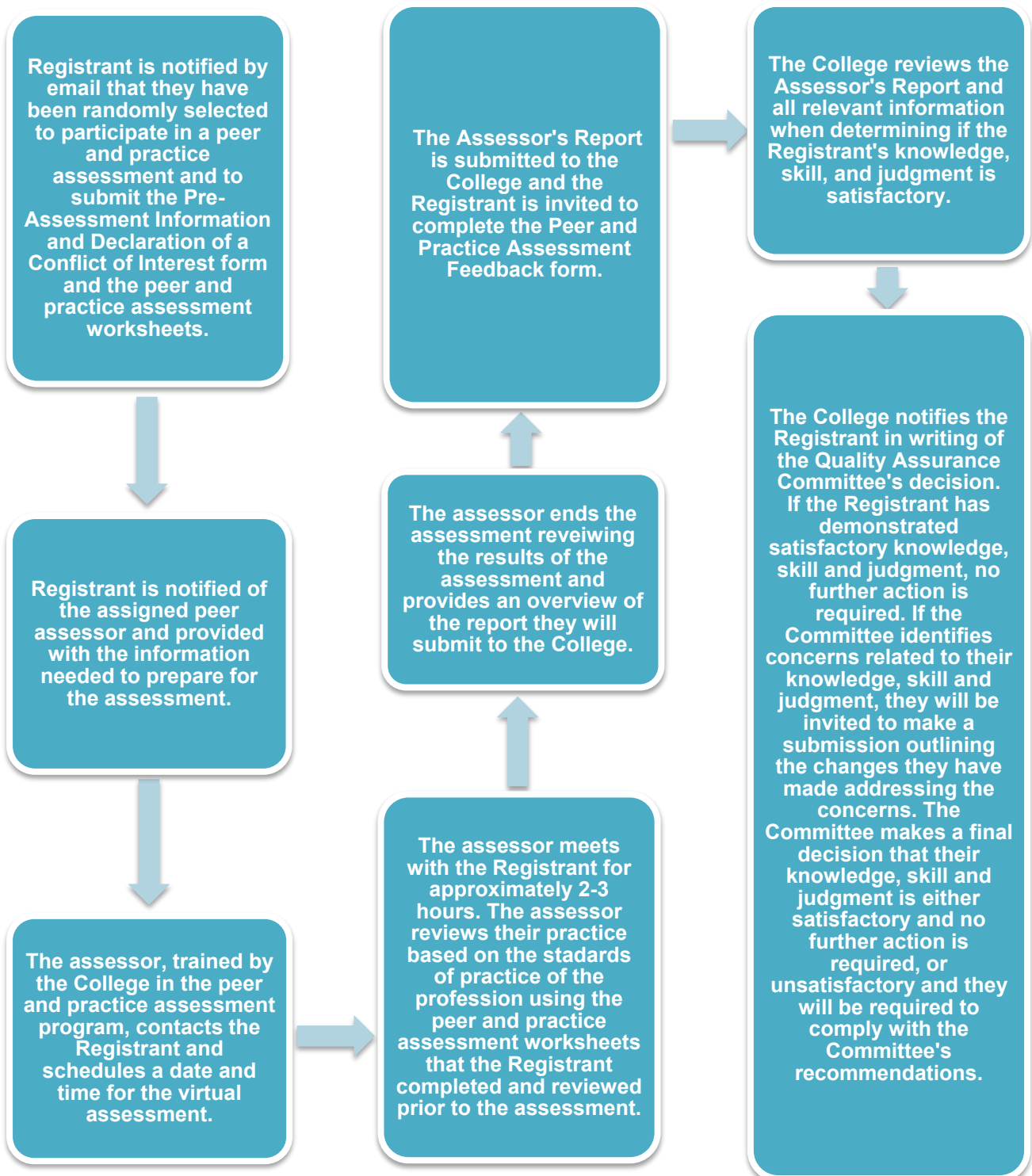
3. There were areas identified that require significant improvement. In this case, you will be invited to make a submission outlining how you intend to rectify these areas or the steps you may have already taken. The submission must be received by the College within 30 days of being notified.

For Registrants who require significant improvement, the QA Committee will consider the Assessor's Report along with any other relevant information including the submission from the Registrant and determine if their knowledge, skill, and judgment is satisfactory or whether additional remediation is required. Registrants who have demonstrated the appropriate knowledge, skill, and judgment will receive a letter indicating that no further action is required.

If the Committee finds that the Registrant's knowledge, skill and judgment continues to be unsatisfactory, Section 80.2 of the *Health Professions Procedural Code* authorizes it to do one or more of the following:

- require the Registrant to participate in continuing education or remediation programs specified by the Committee,
- direct the Chief Executive Officer to impose terms, conditions or limitations, for a specified period of time to be determined by the Committee,
- disclose the Registrant's name and allegations against them to the Inquiries, Complaints and Reports Committee if the QA Committee is of the opinion that they may have committed an act of professional misconduct or may be incompetent or incapacitated.

## Summary of a Peer and Practice Assessment



## FAQs

### **Am I required to undergo a peer and practice assessment?**

All naturopaths who are registered in the General Class with the College of Naturopaths of Ontario are required to participate in the program.

### **I do not see patients; do I need to participate in the peer and practice assessment program?**

If you are registered in the General Class and you do not see patients, you are still required to participate in the peer and practice assessment program. If you have a non-clinical term, condition and limitation on your certificate of registration, you will undergo a modified assessment which includes a review of your professional portfolio and the pre-selected standards of practice, policies and/or guidelines. If you do not have a non-clinical term, condition and limitation on your certificate of registration, you will be required to undergo the full peer and practice assessment.

### **I am registered as Inactive; do I need an assessment?**

No. Inactive Registrants are not required to participate in any of the components of the Quality Assurance Program.

### **I am a new Registrant and have just started working. How will this affect my participation in peer and practice assessment?**

New Registrants of the College will be exempt from the peer and practice assessment program for their initial three years of practise.

### **I am on leave from my employment. What are my responsibilities for peer and practice assessment?**

If you are selected for a peer and practice assessment and are on leave from your naturopathic practice, you may submit an extension request. An application for an extension must be submitted in writing and received by the College within 30 days of being notified of your selection for a peer and practice assessment. The Quality Assurance Committee will review all requests and makes determinations on a case-by-case basis.

### **I work in more than one practice location. Do I need to undergo more than one assessment?**

No. Peer and practice assessments are about assessing your knowledge, skill and judgment. The premises review component of the assessment is to be completed for your primary practice location only.

### **What will happen if I refuse to participate in a peer and practice assessment?**

Participating in a peer and practice assessment is a mandatory part of the Quality Assurance Program. Refusing to participate may be considered non-compliance with the QA Program and the Quality Assurance Committee may refer the matter to the Inquiries, Complaints and Reports Committee (ICRC) for review.

### **How long do I have to complete my peer and practice assessment?**

You have approximately six months from the date of selection by the Quality Assurance Committee to complete your peer and practice assessment.

**How are assessors selected and what kind of training do they receive?**

Assessors are selected based on the cover letter and resumé they submit, as well as an interview with eligible applicants. Peer assessors are trained by the College and participate in additional training to update their skills and techniques, and to review and improve on outcomes. All assessors must be Registrants in good standing with the College, must have actively practised naturopathy for at least 3 years, and have undergone a peer and practice assessment themselves.

**Do I need patient consent to allow the assessor to look at my patient files?**

No. The *Regulated Health Professions Act, 1991* specifically states that regulatory health colleges may review patient files when conducting assessments of Registrants. Privacy legislation supports this right to access patient information in this context.

**Contact**

If you have any questions about peer and practice assessments or any aspect of the Quality Assurance Program, or would like to become a peer assessor, please contact [qa@collegeofnaturopaths.on.ca](mailto:qa@collegeofnaturopaths.on.ca)