



# About the CHO Quality Assurance Program

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## SECTION 1

# QUALITY ASSURANCE PROGRAM<sup>1</sup>

## INTRODUCTION

The College of Homeopaths of Ontario (CHO) understands that **quality care** provided by **current, competent, accountable professionals** who undergo **regular assessment** are key to enhanced public protection.

The Quality Assurance (QA) program (QAP) aims to promote public protection and quality homeopathic practice by supporting registrants to meet the requirements of continuous learning and evaluation, maintaining ongoing competence, and striving to make practice improvements to keep pace of changes in the health care system.

CHO registrants demonstrate their commitment to continuous learning and practice improvement by engaging in continuing education and professional development activities, and by participating in the CHO Quality Assurance (QA) program (QAP)<sup>2</sup>. These actions ensure the competence of registrants to the public, now and in the future.

### Why a Quality Assurance Program?

Registrants must not only be competent, but they must also be up-to-date in their knowledge and skills. The practice of the profession of homeopathy is growing, regulations change, and the health care system evolves. Registrants' professional roles, responsibilities and accountabilities differ today from those of yesterday, and are likely to evolve even more in the future.

The QAP has been developed to guide, support and monitor registrants through this professional requirement. The QAP guides registrants to improve their practice and ensure that the varying laws and regulations, practice standards and guidelines impacting the profession of homeopathy are implemented in a consistent and appropriate manner. The QA program is intended to be instructional, not punitive.

### CHO's QA Program

- Is consistent with the CHO's mandate to regulate the profession in order to protect the public interest;
- Encourages registrants to take seriously their professional responsibility to ensure their continuing competence and quality improvement in a changing health care environment; and
- Provides an opportunity for registrants to control and direct their own continuing education and professional development.

The QAP also provides registrants with a method of demonstrating compliance with the CHO Professional Practice Standard 17 Competence, which states:

"The College of Homeopaths of Ontario (the "CHO") requires proof that each Registrant meets and maintains their professional competency throughout their career. The assessment of competences is based on the latest version of the *Competency Profile for Entry-to-Practice Homeopaths Practising in Ontario*. Registrants are expected to practice within their individual level of competency and to act appropriately when a patient requires care outside of the homeopaths scope of practice or individual level of competence."

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<sup>1</sup> The requirements for the QA program are set out in the Health Professions Procedure Code, Schedule 2 of the *Regulated Health Professions Act* (RHPA) and the Quality Assurance Regulation (O. Reg. 32/13) made under the *Homeopathy Act*.

<sup>2</sup> The requirements for the QA program are set out in the Health Professions Procedure Code, Schedule 2 of the *Regulated Health Professions Act* (RHPA) and the Quality Assurance Regulation (O. Reg. 32/13) made under the *Homeopathy Act*.

## **DESCRIPTION OF STANDARD 17 COMPETENCE**

1. Each registrant is responsible for maintaining his or her competence.
2. Each registrant is responsible for evaluating his or her own educational requirements and meeting those requirements through programs of continuing education.
3. The registrant shall perform within his or her scope of practice, education and experience.
4. The registrant will refer or assist patients to find the necessary professional help when the condition of the patient falls outside the registrant's scope of practice, education or experience.
5. The registrant shall not engage in the practice of homeopathy while his or her ability to do so is impaired.
6. The registrant shall ensure that he or she meets the quality assurance requirements outlined in the Quality Assurance Regulation and Quality Assurance Program of the CHO.
7. The registrant shall maintain current knowledge of legislation, standards and policies pertaining to the delivery of homeopathy and general welfare of his or her patients.

## **WHO ADMINISTERS THE QA PROGRAM?**

The Quality Assurance Committee (QA Committee or QAC) is responsible for administering and monitoring registrants' compliance with the QA program. The QAC is one of the statutory committees of the CHO. It is currently made up of eight individuals – six elected and two publicly appointed members of Council.

Members of the QA Committee for 2021 include:

Heather Broadhead, Public member  
Anna Cardozo, HOM (Chair)  
Kerri Flood, HOM  
Julie Hughes, Public member  
Paul Joseph, HOM  
Sanjeev Nayyar, HOM  
Sukhdev Singh Kooner, HOM  
Guru Dutt Vaid, HOM

The QAC is separate and independent from the other statutory committees of the CHO, including the Executive Committee, the Registration Committee, the Inquiries, Complaints and Reports Committee and the Discipline Committee.

<sup>1</sup> The requirements for the CHO QA program are set out in the Health Professions Procedure Code, Schedule 2 of the *Regulated Health Professions Act* (RHPA) and the Quality Assurance Regulation (O. Reg. 32/13) made under the *Homeopathy Act*.

## Section 2

# COMPONENTS OF THE QA PROGRAM

## QA PROGRAM OVERVIEW

The quality assurance regulation (O. Reg. 32/13) made under the Homeopathy Act states that the QA program must have the following components:

1. Continuing education or professional development designed to,
  - a. promote continuing competence and continuing quality improvement among the members
  - b. address changes in practice environments, and
  - c. incorporate standards of practice, advances in technology, changes made to entry to practice competencies and other relevant issues at the discretion of the Council
2. Self, peer and practice assessments
3. A mechanism for the CHO to monitor registrants' participation in and compliance with the program

The CHO QA program is based on the assumption that registrants come into the CHO with appropriate skills and knowledge acquired through prior training and education and that these initial competencies are maintained through lifelong learning and the expectation of adherence to the standards of practice.

The QAP is based on the principles of adult education. This approach allows registrants to choose activities based on their individual learning needs and style, resources available, and acknowledges that learning comes from engaging in a variety of activities.

## QA PROGRAM ELEMENTS

Every CHO registrant is required to participate in the QAP each year and to co-operate with the QA Committee and any appointed assessor. The CHO QA Program includes the following elements:

### 1. Quality Assurance Requirements Declaration

The declaration is completed each year by every registrant at the time of their annual renewal of registration. Registrants confirm that they understand the requirements of the QA program and whether they have complied with the requirements of the QA program.

### 2. Quality Assurance Professional Portfolio:

The QA Professional Portfolio shall be completed **each calendar year by every registrant**. This portfolio includes both the self-assessment and continuing education and professional development (CEPD) component requirements. The QA Professional Portfolio includes the following activities and supporting records:

- self-assessment based on the CHO Competency Profile for Entry-to-Practice Homeopaths Practising in Ontario;
- self and practice reflection form;
- peer-to-peer mentor feedback (optional);
- individual learning plan and identification of learning needs, goals and plan;
- continuing education and professional development (CEPD) activity log and available supporting materials recording and supporting the activities completed during the calendar year.

### **QA SELF-ASSESSMENT AND REFLECTION**

The self-assessment is based on the CHO's entry-to-practice competency profile and the CHO professional practice standards. Each year, a registrant is required to assess their individual practice against the consciously competent self-assessment questionnaire. Additionally, the CHO encourages registrants to utilize the provided self and practice-reflection form to identify practice strengths and areas which require improvement.

Through these tools a registrant may identify opportunities to enhance their knowledge or skill related to particular Professional Practice Standards, individual competences and approaches to their practice and patient relations. The outcome of this self-assessment will result in an individual learning plan and action steps for improvement.

### **QA PROFESSIONAL PORTFOLIO**

**Each CHO registrant is required to complete and record at least 15 hours of continuing education and professional development (CEPD) activities each year in order to show commitment to the CHO's QA program.** These learning activities should support the outcome of the annual self-assessment and learning plan. CEPD may include professional readings, seminars, webinars, conferences, courses, CHO learning modules, writing and delivering presentations, courses or clinical teaching, research, writing a professional journal article or paper, and others activities which support the registrant's individual learning plan and goal(s). It is the registrant's decision as to which learning activities best support his/her individual learning plan. The choice of continuous learning activities must, however, be related to improving knowledge, skills and judgment as a member of the profession.

Registrants record and explain what they learned, how the learning supported his/her individual learning plan, and how this learning has helped them in their practice. Registrants should attach evidence of their learning, to their Record of Continuing Education and Professional Development log as part of their QA professional portfolio.

By registrants engaging in continuing education and professional development activities that relate to the practice of the profession, the public is assured of the maintenance and improvement of registrants' competence over time.

A registrant may be requested to submit the QA Professional Portfolio for assessment by the CHO Quality Assurance Committee (QA Committee).

### **3. Peer and Practice Assessment by means of an assessor**

A QA Assessor is an individual registrant selected by the QA Committee in accordance with the QA regulation. There are more than one QA Assessor trained to undertake Peer and Practice Assessments (PPA) on behalf of the College. During the meeting or series of meetings the two will discuss the registrant's compliance with QAP requirements, review pieces of the registrant's professional portfolio, review gaps in the registrant's competencies and plans to address these gaps (if any). During the meeting the QA Assessor may also ask to review a variety of practice documents, and to observe the clinic setting. A confidential report of the assessment is prepared by the assessor, a copy of which is provided to the QA Committee and the registrant.

## **FURTHER DETAILS**

### **TYPES OF CEPD ACTIVITIES IN A LEARNING PLAN**

The QA program allows you a great deal of flexibility with regard to the type of continuous learning activities you undertake. The continuous learning activities may be in any format which you find meets your learning needs (e.g. workshops, seminars, formal courses, reading journals, etc.). The CHO will not be “approving” courses or assigning points to CEPD offerings. It is the registrants’ decision as to which learning activities will be part of your QA Professional Portfolio to support your learning needs and learning plan. The choice of continuous learning activities must, however, be related to improving knowledge, skills and judgment as a member of the profession.

You may wish to include other types of activities which help further your practice learning and individual learning plan. The following are just a few examples of the topic areas/types of continuous learning activities outside of the CHO QAP policy 10.

1. Patient and other health care professional support  
Example:
  - Exchange arrangement such as volunteering for Homeopaths Without Boarder and other service based clinical settings which may provide experience different then your current practice experience.
2. Care enhancement  
Examples:
  - Working on a community committee to improve patient care or public safety;
  - Learning about new diseases or new remedies through a study group.
3. Practice changes/enhancements  
Examples:
  - Learning a new technique or approach to care through an informal group of homeopaths;
  - Presenting procedures/techniques/new approaches to fellow health care professionals.
4. Patient or practice focused learning and information exchanges with colleagues and other health care professionals.

## Section 3

### MONITORING THE QA PROGRAM

The legislation requires the CHO to have a mechanism to monitor registrants' participation in and compliance with the QA program.

The Quality Assurance Declaration provides the CHO, on an annual basis, with confirmation that registrants' participation in the QA program. Each year, on a registrant's annual renewal of registration, each registrant understands the requirements of the QA program and their responsibility to participate in the program. This is achieved in part through a series of questions related to the registrant's obligations under the QA program, and confirms that the registrant understands that the QA program requires that, in each calendar year, the registrant participates in self-assessment and at least 15 hours of continuing education and professional development activities, maintains a QA Professional Portfolio, keep a record of their self-assessment and completed activities using the tools provided by the CHO and retain these records for **ten years**.

In addition to the annual declaration, the CHO requires each registrant to submit a copy of their individual learning plan.

Also, each year the CHO requires a percentage of registrants to submit their records of their QA Professional Portfolio including self-assessment documents and participation in continuing education and professional development activities, and/or to undergo a peer and practice assessment. Individual registrants are notified in writing by the CHO when they are required to submit their QA records for assessment or undergo a peer and practice assessment.

The percentage of registrants required to submit their QA records or to undergo a peer and practice assessment in any given year is set by the CHO Quality Assurance Committee. Registrants are selected by means of a random selection generated by a computer program.

The QA Committee (QAC) can analyze and monitor registrants' participation in the QA program through the CHO database. The QAC may report on aggregate results of program participation and compliance, but does not report on individual outcomes.

## SECTION 4

### ROLE OF THE QA COMMITTEE

The role of the QA Committee (QAC) is to administer the QA program in accordance with the Regulated Health Professions Act, 1991, the College's Quality Assurance (QA) regulation and any other applicable law.

The QAC is one of the CHO's statutory committees, and is currently comprised of Council members (professional and public). Members of the QAC are required to keep all information about registrants' QA records confidential, except under certain circumstances set out in the legislation.

The QAC can require registrants to submit their QA Professional Portfolio to the CHO for assessment by the QAC or a QA Assessor appointed by the QAC. In most cases, the QAC is satisfied with registrants' QA records. However, after assessing a registrant's QA records, the QAC can require a registrant to participate in one or more specified continuing education or professional development activities, or refer a registrant for a peer and practice assessment.

The QAC can also select registrants to undergo a peer and practice assessment in accordance with the QA regulation. In most cases, the QAC is satisfied with the report of the assessment. However, if the QAC finds that a registrant's knowledge, skills and judgement are unsatisfactory, the QAC may, among other things, require a registrant to participate in specified continuing education or remediation programs, such as specified education, refresher or continuing education programs, courses or initiatives.

The QAC may also provide the name of the registrant and allegations against the registrant to the Inquiries, Complaints and Reports Committee if the QAC is of the opinion that the registrant may have committed an act of professional misconduct, or may be incompetent or incapacitated. For example, failure to co-operate with the QAC and failure to comply with a requirement of the QAC may be grounds for a finding of professional misconduct.

## SECTION 5

### DEFINITIONS

The following is a quick reference list of terms and definitions that may help you as you work through the QAP and materials.

**“Continuing Education and Professional Development or CEPD”** means a wide variety of continuing education and professional development activities which registrants can engage in to assist in meeting learning needs and goals and promoting continued competence. For guidelines of which continuing education activities are recognized as part of continuing education and professional development activities refer to Policy QAP-10 Allocation of Continuing Education and Professional Development Hours which is available on the College’s website.

**“Peer and Practice Assessments or PPA”** involves a qualified appointed peer assessor meeting with and interviewing a registrant regarding specific components of his or her practice. During the meeting or series of meetings the two will discuss the registrant’s compliance with QAP requirements, review pieces of the registrant’s professional portfolio, review gaps in the registrant’s competencies and plans to address these gaps (if any). During the meeting the QA Assessor may also ask to review a variety of practice documents, and to observe the clinic setting. A confidential report of the assessment is prepared by the assessor, a copy of which is provided to the QA Committee and the registrant.

**“Professional Portfolio”** means a registrant’s collection of documents providing proof and supporting of your annual commitment to personal professional development and your participation in the CHO QAP. This portfolio includes materials demonstrating both the self-assessment and continuing education and professional development (CEPD) component requirements of the CHO QAP. It contains all of the individual details, records and supporting documentation including proof CEPD activities, declarations, self-assessment, learning needs and learning plans. A registrant may be asked to submit the QA Professional Portfolio for assessment by the CHO QAC. The QA **Professional Portfolio** is completed each calendar year by every registrant.

#### **Professional Practice Standards and Guidelines**

The Professional Practice Standards and Guidelines have been developed by the College of Homeopaths of Ontario (CHO) to describe the expectations for professional practice of registrants. The Standards of Practice describe what each CHO registrant is accountable and responsible for in practice. Together, with the CHO Competency Profile for Entry-to-Practice Homeopaths Practicing in Ontario, they represent performance criteria for registrants and can be used to interpret the scope of practice to the public and other health care professionals.

The Standards of Practice reflect the knowledge, skills and judgement that registrants need in order to perform the services and procedures that fall within Ontario’s regulatory environment and the scope of practice of the profession.

**“Program”** means the quality assurance program required by section 80 of the Health Professions Procedural Code.<sup>3</sup>

**“QA Assessor”** means a person appointed under section 81 of the Health Professions Procedural Code.<sup>4</sup>

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<sup>3</sup> Ibid.

**“Quality Assurance”** is the aim of promoting public protection and quality homeopathic practice by supporting registrants to meet the requirements of continuous learning and evaluation, maintaining ongoing competence, and striving to make practice improvements to keep pace changes in the health care system.

**“Quality Assurance Committee or QA Committee or QAC”** means is a statutory committee of the CHO. It has powers under section 80.2 of the Regulated Health Professional Act, 1991, Health Professions Procedural Code (the Code) Schedule 2. The QAC is responsible for administering and monitoring registrants’ compliance with the QA program in accordance with the RHPA and the College’s QA regulation.

**“Quality Assurance Declaration”** is completed each year by every registrant at the time of their annual renewal of registration. Through this declaration registrants confirm that they understand the requirements of the QAP and their responsibility to participate in the program.

**“Quality Assurance Learning Plan”** is completed each calendar year by each registrant following a conscious competency based self-assessment, self and practice reflection, identification of learning needs, and goal setting. The objective of this plan is to help the registrant identify gaps in their knowledge, skill and judgment and to improve their professional practice and competence. The registrant is required to submit a copy of their annual learning plan to the College.

**“Quality Assurance Program or QAP”** means a mandatory, instructional, non-punitive professional development resource for CHO registrant to improve their practice and ensure that the varying laws and regulations, practice standards and guidelines impacting the profession of homeopathy are implemented in a consistent and appropriate manner. The QAP has been developed by CHO to guide, support and monitor registrants.

**“Quality Assurance Records”** include all of the information listed in the QA Professional Portfolio in addition to any direction provided by the QAC. QA records must be kept for 10 years.

**“Quality Assurance Self-Assessment and Reflection”** The purpose of the Quality Assurance self-assessment and reflection is continuous quality improvement. The process helps Registrants’ recognize areas of strength and weakness and plan for ways to improve practice life. At the beginning of each calendar cycle, the Registrant should reflect on his/her practice and start planning for continuing education and professional development activities for that year using a *Self-Assessment Questionnaire*. The *Self-Assessment Questionnaire* provides a list of competency areas to guide the Registrant in self-reflection. This *Questionnaire* is based on a Conscious Competence Model which can be used to help the Registrant reflect on her/his strengths and areas that need improvement. Registrants may also utilize the *Self and Practice Reflection Worksheet* and the *Peer-to-Peer Feedback Form* to assist in identifying learning needs, and creating a learning plan and learning goals.

**“RHPA”** means *Regulated Health Professions Act, 1991*.

## SECTION 6

### **Practice Advisory**

If you have questions about the QA program or require Practice Advisory assistance, please contact the CHO office by email at [communications@collegeofhomeopaths.com](mailto:communications@collegeofhomeopaths.com) or phone at 647-749-9366. We will be happy to answer your questions.