

Policy: Audit Assessment Criteria

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| Date established: | May 24, 2022 | Category: | Registration |
| Approved by: | CAHPPEI Council | Authority: | RHPA S. 60.1 |

Policy Statement

The College of Allied Health Professionals of Prince Edward Island is the body that regulates the professions of Medical Laboratory Technologist (MLT), Medical Radiation Technologist (MRT), and Respiratory Therapist (RRT) and governs its registrants in accordance with the *Regulated Health Professions Act* and the *Allied Health Professionals Regulations*. Pursuant to the Act, the College is mandated to develop, maintain, and monitor compliance and enforce standards respecting continuing education and competency for its registrants.

The Continuing Education and Competence Program (CEC) is a tool developed by CAHPPEI to ensure that all registered MLT, MRT, and RTs of the College maintain and further develop the competencies required to provide health services safely and ethically. The CAHPPEI ensures compliance with the mandatory CEC program through an annual review of randomly selected audits of the registrant's professional portfolio.

Definitions

- **Audit Assessment Criteria Rubric [AACR]:** An audit scoring system, used in the review of professional learning to determine compliance with the CEC program
- **Audit Committee:** A committee composed of the College registrant's peers and public representative to review CEC program compliance
- **CEC Audit:** An official review by the College Audit Committee of registrant's participation in the CEC program
- **Continuing Education and Competence Program (CEC):** Is a regulatory program and quality assurance tool that ensures ongoing education for all College registrants.
- **Compliant:** Having all components of a professional learning plan and credit hours completed in accordance with the requirements outlined in the Continuing Education and Competence Program.
- **Non-Compliant:** Failing to have any component of a CEC professional learning plan and credit hours completed as required by the College.
- **Professional Portfolio:** A record of a registrant's completed learning plan, and record of credit hours and activities.

1. Audit Procedure

- 1.1 The College shall engage in a yearly audit of 15-20% of registrants from each profession. Names will be chosen by simple random selection regardless of registration date.
- 1.2 The Registrar may specifically select registrants for audit outside of the random selection process if deemed appropriate. Such reasons include:
 - i. Renewals received after the renewal deadline of July 15
 - ii. Submission of non-compliant CEC in the previous audit year
 - iii. Declaration to the Registrar of non-compliance with the CEC
 - iv. Late submission of registrant's professional portfolio in the previous audit year
- 1.3 Registrants will be notified by email no later than August 31, advising they have been selected for an audit of their professional portfolio (CEC).
- 1.4 Registrants selected in the audit shall have fifteen (15) days to submit their completed professional portfolios to the Registrar.
- 1.5 The Audit Committee members will review each submission and examine each of the criteria in the Audit Assessment Criteria Rubric (AACR) to determine compliance or non-compliance.
- 1.6 Registrants must successfully meet all listed requirements and submit all documents, as per the College's CEC guidelines, College Bylaws, and policies to be considered compliant.
- 1.7 All College audits and audit gradings are confidential. All parties involved in reviewing professional portfolios and grading are bound by a confidentiality and privacy agreement, signed annually.

2. Audit Assessment Process

- 2.1 Receipt of professional learning plan by the submission deadline, as stated in the College's Audit policy (exceptions are granted in extenuating circumstances only and require the approval of the Registrar.)
- 2.2 Members who are late without a deadline exception granted are automatically selected for audit the following registration renewal year.
- 2.3 Registrants may be audited two (2) consecutive years.
- 2.4 Required components of the learning plan for compliance with the CEC program audit includes:

2.4.1 Learning Plan

- a. Identification of a minimum of 2 learning goals connected to the Standards of Practice,
- b. Rationale for working towards these goals,
- c. Learning activities identified (reading, hands on practice, simulation, course, conference, etc.),
- d. Minimum of 20 hours in learning activities completed with evidence of completion,

- e. Potential professional and client outcomes identified, and
- f. Proposed completion date identified.

2.4.2 Self-Reflection on Achievement

- a. Self-reflection completed for each activity,
- b. Reflection to include how the activity met or did not meet chosen goals, and
- c. Reflection on how any learnings will be incorporated into professional practice.

3. Notification of Compliance or Non-compliance

3.1 Registrants will be notified via email of compliance or non-compliance with the CEC program by October 31.

3.2 Notification emails will contain the following information:

- a. For compliant submissions:
 - i. Notification letter of compliance
 - ii. Copy of the AACR
- b. For non-compliant submissions:
 - i. Notification letter of non-compliance detailing deficiencies, remediation process, deadlines, appeal process
 - ii. Copy of AACR

4. Incomplete or Non-compliant Submissions Process

4.1 The Audit Committee is responsible for the final decision regarding compliance.

- a. In collaboration with the Registrar, the Audit Committee will detail steps the non-compliant registrant must take to attain compliance.
- b. The Registrar will communicate to the registrant via notification letter the remediation process.

4.2 The timeframe for completing and submitting the remediation requirements will be determined by the Audit Committee, in consultation with the Registrar, based on the nature and extent of the deficiencies identified in the audit.

4.3 The Audit Committee will evaluate the updated professional portfolio within 14 days of receiving the file.

4.4 Based on the results of the re-evaluation, the Audit Committee will:

- a. Issue a letter of compliance to the registrant, including a copy of the AACR or,
- b. Issue a letter of non-compliance to the member, including a copy of the AACR, notifying the registrant of next steps.

5. Repeated Non-Compliance with the CEC Program

5.1 The Audit Committee is responsible for determining when remediation is no longer a productive option and may make recommendations to the Council for further action, including, but not limited to:

- i. Terms and conditions be placed on the registrant's registration
- ii. Suspension of the registrant's registration
- iii. Referral to the Investigation Committee for professional misconduct.

References

Regulated Health Professions Act (RHPA)

Allied Health Professionals Regulations

| Revision History | | |
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| Revision date | Revision note | Approved by |
| May 24, 2022 | Policy established | CAHPPEI Council |
| July 9, 2025 | Policy reviewed | CAHPPEI Council |
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