

Continuing Education Program Handbook

Continuing education is an important and vital part of our ever-changing health care field. Since the enactment of the *Respiratory Therapy Act* in 2009, respiratory therapy is a self-regulated profession in Saskatchewan. As a licensed health care professional, a registered respiratory therapist (RRT) is responsible to the public to maintain the highest standard of care.

As part of a regulated profession, RRTs must demonstrate their commitment to professional development through the SCRT continuing education program. According to the SCRT Regulatory Bylaws (sections 15 and 18), the following provisions are required for continuing competency:

1. A minimum of 1500 practice hours over a 4-year period.
2. **A minimum of 48 continuing education credits (CECs) over a 2-year audit period.**

Each year, 5% of the eligible SCRT membership has their continuing education credits audited.

In accordance with the Regulatory Bylaws, the Continuing Education Committee (CEC) has designed a program that defines the type of educational activities an RRT may participate in and their allotted credit values. Continuing education credits are earned from a variety of activities designed to maintain or improve your skills and knowledge as an RRT, or within your current RRT designated role.

Please review this Handbook along with the attached documents. A copy of the Continuing Education Policy can be found within this package.

Any questions or concerns may be emailed to the Continuing Education Committee at:
info@scrt.ca.

Continuing Education Credit Guidelines

The credit categories are as follows:

- 1. Professional Education Activities**
- 2. Advanced Learning and Certifications**
- 3. Student Preceptorship and Staff Orientation**

RRTs work in a variety of environments and the credit system attempts to be a fair system for all RRTs working in Saskatchewan. This education package is not an exhaustive list of all potential continuing education credit sources but is simply intended to give examples of the types of activities that may fit in each category.

RRTs must continue accruing their credits while holding a license, even if on a leave of absence from their employer. (Special consideration for individual cases may occur after consultation with the Continuing Education Committee.)

It is the RRT's responsibility to ensure all guidelines are met. Recording is required on the available forms, along with all supporting documentation provided. If information submitted, or supporting documentation is incomplete, full credit cannot be allotted.

NOTE: New this year:

1. Attended and proactive sessions have been combined into category 1: **Professional Education Activities**, and the minimum credits from the previous categories removed. Members may choose to obtain **ALL** their CEC credits in the new category 1.
2. All members must include the **National Competency Framework (NCF)** competency areas of focus that corresponds to their activities/events completed (**see Appendix A of this guidebook and the corresponding form**).

Current process:

3. Although the online log available through the SCRT member portal may be used for your personal use and ease of recording, when you are audited, **you must transfer the information to the SCRT Recording Forms** in order for all required information to be included as part of your submitted package for the committee to review and assess.
4. All professional education activities submitted must have **your personal notes included**, the power-point or handout of the speaker's notes is not sufficient.
5. If the committee does not receive your submission within the specified deadline, an administrative fine of \$50.00/week may be applied until the package is received by the college, as per the Fees Bylaw (2019) and amended CEC policy (section 6.4).

If a member has any questions about continuing education credits, they should forward them to: info@scrt.ca. The Committee will review and respond to the member's request as soon as possible. Any decision made by the Committee will be given to the RRT who will be allowed to review, provide a rebuttal, and/or ask for an appeal to SCRT Council.

CREDIT CATEGORIES:

Category 1: Professional Education Activities (RT related) *(previously attended and proactive sessions)*

- Members may choose to obtain all their CEC hours in category 1.
- 1 hour of time = 1 credit (unless otherwise noted)
- **Activities must meet at least one of the competencies listed in Appendix A. (NEW)**
- All submissions in Category 1 **must be accompanied by your summary notes and submit proof of attendance indicating CEC hours assigned: such as receipt for registration, certificate of attendance, transcript of marks, attendance sheet validated by supervisor.**

- CE Credits can be derived from a variety of media, including but not limited to:
 - ✓ Attending a lecture
 - ✓ Employer continuing education courses
 - ✓ Forums (conferences/education days)
 - ✓ Grand/formal teaching rounds
 - ✓ Workshops or in-service
 - ✓ Teleconference, podcast, webinars
 - ✓ SCRT/ CSRT/CBRC/Accreditation Canada volunteer
 - ✓ Committee involvement (staff/manager meetings don't count unless they have a specific education component)
 - ✓ Volunteerism promoting respiratory therapy
 - ✓ Self-directed learning/journal club/reading

Category 2: Advanced Learning and Certifications (recognized training courses)

- 1 hour of time = 2 CEC (for 2.1 - 2.4)

- 2.1 Educational module development
Required to submit the module along with hours for development.

- 2.2 Development/revision of policies and procedures
Submit policies and procedures developed along with summary of supporting research and hours of work on the project. May submit draft policy if still in draft stage, or, minutes/agenda from meetings, or supporting email from chair of committee.

- 2.3 Formal lecture or presentation
Hours recognized would include preparation and presentation.
Require summary of presentation and date/time etc. of presentation.

2.4 Publications

Submission of article published, hours spent on research, hours spent on writing.
The hours will count in the year of publication.

2.5 Certifications

- ✓ Certified Respiratory Educator - 27.5 credits (27.5 credits for recertification)
- ✓ Certified Asthma Educator - 17.5 credits (17.5 credits for recertification)
- ✓ COPD Educator - 21.5 credits (21.5 credits for recertification)
- ✓ Spirotrec – 5 credits
- ✓ SAIL Home Oxygen Tester Certification – 2 credits
- ✓ BCLS- 5 credits
- ✓ ACLS- 12 (7 credits for recertification)
- ✓ PALS- 12 (8 credits for recertification)
- ✓ NRP- 10 credits

Copy of certificate required

Credits on job-related courses from an approved institution will be based on the institution's evaluation.

2.6 University/college courses

each job-related university course is worth 5 credits.

description of course, name of institution, must show completion and pass and provide documentation.

Category 3: Preceptorship and New Staff Orientation

- An 8-or 12-hour shift = 1 credit
- Maximum 12 credits per 2-year audit period (**NEW**)
- 0 minimum credits required per 2-year audit period

Student preceptorship/new staff orientation hours are defined as contact hours spent in the clinical setting with students, staff and/or other health professionals. Preceptors are mentors and set the standards for patient care and performance expectations within the clinical setting (in conjunction with established policies and procedures, and legislation).

3.1 Proof of student preceptorship/new staff orientation:

Members are responsible for tracking student/new staff contact hours.

Forms provided by the SCRT may be used, or self-recording may be used.

Schedules *may* have to be produced to verify claimed credits.

A brief summary of topics /skills covered should be listed on the recording sheet.

SCRT Continuing Education Recording Form

Name: *Barbara Hayfield*

SAMPLE

<p>Credit Category: <i>(mark one)</i></p> <p><input checked="" type="checkbox"/> Professional Education Activity <input type="checkbox"/> Advanced Learning and Certifications</p> <p><input type="checkbox"/> Student Preceptorship and Staff Orientation</p> <p>Competency areas: <i>(Identify the area(s) of competency and skills that match the credit category completed, ie: Core competency: 1.2.3 Communicate effectively.)</i> Attitudes and Values, Core Competencies, Clinical Competencies, Foundation Science</p> <p><i>Core Competency - 1.1.1 Optimize patient safety</i></p>
<p>DATE: <i>March 31, 2022</i> PRESENTER: <i>Sally Brown</i></p> <p>NAME OF PRESENTATION: <i>Patient Safety: It's Everyone's Responsibility! Quality and Risk Program</i></p> <p>LENGTH OF PRESENTATION: <i>1 hrs. = 1 credits</i></p>
<p>DETAILED SUMMARY:</p> <p><i>Defined what is patient safety? Objective: strive to: - Decrease infections - Decrease falls - Decrease medication incidents - Raise patient awareness of their responsibility for their safety - Enhance patient outcomes/wellness - Enhance the working environment.</i></p>
<p><i>Patient Safety Initiatives: Improved identification/labeling on patient charts, armbands, on medications etc. · Improved documentation processes - physician orders, clinician notes, care plans · Improved Falls Prevention program · Medication Reconciliation practices · Infection Control protocols in place · Improved Preventive Maintenance/ equipment replacement.</i></p>
<p><i>Ongoing education/training including Lean/skills days - result is competent providers/teams · Patient Safety Walkabouts · Position descriptions/Scopes of Practice/Performance Appraisals · Revised Adverse Events Reporting and Disclosure processes. Professional Practice Coordinator Position ensures Best Practice Guidelines followed.</i></p>
<p><i>Have a "Culture of Patient Safety" Providers are responsible for the quality of their work within the system.</i></p>

<p><i>What is an Adverse Event/Incident? An “Adverse Event” is defined in one of three ways: 1. An unexpected and undesired incident directly associated with the care and services provided to the patient 2. An incident that occurs during the process of providing health care and results in patient death or serious disability, injury or harm 3. An adverse outcome for a patient, including an injury or complication.</i></p>
<p><i>Levels of Harm · There are four levels of potential harm caused by adverse events or medication errors · In addition there is a “Near Miss” category.</i></p>
<p><i>Reporting an Adverse Event and Disclosure: Policies & Procedures and Incident/Adverse Event forms. Medication errors have a separate form for completion.</i></p>
<p><i>Your Responsibility · Comply with policies related to incident/adverse event reporting, disclosure · Attend education events · Identify/report risks/incidents · Take action to address risks · Lead by example.</i></p>

SCRT Continuing Education Recording Form

Name: _____

<p>Credit Category: (mark one)</p> <p><input type="checkbox"/> Professional Education Activity <input type="checkbox"/> Advanced Learning and Certifications</p> <p><input type="checkbox"/> Student Preceptorship and Staff Orientation</p> <p>Competency areas: (Identify the area(s) of competency and skills that match the credit category completed, ie: Core competency: 1.2.3 Communicate effectively.) Attitudes and Values, Core Competencies, Clinical Competencies, Foundation Science</p> <p>_____</p> <p>_____</p>	
DATE:	PRESENTER:
NAME OF PRESENTATION:	
LENGTH OF PRESENTATION: ____ hrs. = ____ credits	
DETAILED SUMMARY:	

APPENDIX A: Areas of Competency: NEW

The following competency areas and skills are required for RTs entering practice and throughout their careers. Licensure requires proficiency in all elements of the competency areas, with the ability to function independently without supervision.

Competencies that match the credit category activities completed must be identified on your recording sheet. (See National Competency Framework for more detail.)

1.1 Attitudes and Values

- 1.1.1 Duty to patients
- 1.1.2 Duty to others
- 1.1.3 Perform within competence
- 1.1.4 Confidentiality
- 1.1.5 Participate in continuous professional development
- 1.1.6 Independence and impartiality
- 1.1.7 Honesty and integrity
- 1.1.8 Supervision of others
- 1.1.9 Comply with codes of conduct and practice
- 1.1.10 Professional liability insurance
- 1.1.11 Conflicts with moral or religious beliefs
- 1.1.12 Environment and sustainability
- 1.1.13 Obligation to report unsafe or inappropriate practices
- 1.1.14 Behaviour

1.2 Core Competencies

- 1.2.1 Provide evidence-informed, patient-centred, respiratory care
- 1.2.2 Demonstrate professional behaviour
- 1.2.3 Communicate effectively
- 1.2.4 Collaborate in the interdisciplinary health care team
- 1.2.5 Optimize cardio-respiratory health and wellness of the community
- 1.2.6 Demonstrate critical thinking and reasoning skills
- 1.2.7 Perform administrative duties
- 1.2.8 Implement preventive measures to ensure health and safety
- 1.2.9 Demonstrate accountability appropriate to role in the health care team

1.3 Clinical Competencies

- 1.3.1 Assess patient's cardiorespiratory status
- 1.3.2 Optimize patient safety
- 1.3.3 Administer medication and substances

- 1.3.4 Manage airway
- 1.3.5 Perform anaesthesia assistance
- 1.3.6 Provide optimal ventilation assistance
- 1.3.7 Execute resuscitation
- 1.3.8 Administer cardio-pulmonary diagnostic tests
- 1.3.9 Perform adjunct therapies
- 1.3.10 Perform invasive vascular procedures

1.4 Foundation Science

- 1.4.1 Apply knowledge of anatomy and physiology
- 1.4.2 Apply knowledge of chemistry and biochemistry
- 1.4.3 Apply knowledge of physics
- 1.4.4 Apply knowledge of pharmacological principles
- 1.4.5 Apply knowledge of microbiology
- 1.4.6 Apply knowledge of pulmonary pathophysiology
- 1.4.7 Apply knowledge of cardiovascular pathophysiology
- 1.4.8 Apply knowledge of other diseases and disorders