



# ACO CONTINUING COMPETENCE PROGRAM MANUAL

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## Introduction

The Alberta College of Optometrists (ACO) is committed to ensuring public safety through the provision of a validated, accurate, repeatable, unbiased and contemporary Continuing Competence Program that enables and encourages lifelong learning and continuous professional development with the end result of improved health care outcomes for all Albertans.

The assessment of a health care practitioner's competence is an extremely complicated process. As such, the ACO utilizes various "tools" to assess and assist our members in maintaining their competence throughout their careers. All Regulated Members have the individual responsibility to understand and demonstrate appropriate knowledge, skills, behaviors and judgment on a daily basis.

The profession of optometry is regulated under the Alberta *Health Professions Act* (HPA), *Optometrists Profession Regulation*, ACO Bylaws, ACO Standards of Practice, ACO Code of Ethics, Guidelines to the ACO Standards of Practice, ACO Clinical Practice Guidelines and other associated ACO Advisories.

No corporate, private or government money was or is currently used to develop, review, verify or fund this program. All costs associated with the ACO Continuing Competence Program are completely funded by Alberta optometrists through the Alberta College of Optometrists.

***The Alberta College of Optometrists defines competence as having the knowledge, skills and ability to perform the right procedure to the right person at the right time.***

***The Alberta College of Optometrists is mandated to carry out its activities; and, govern and guide its regulated members in a manner that protects and serves the public interest.***

# **ACO Code of Ethics**

## **ACO Standards of Practice**

### **Guidelines to the ACO Standards of Practice**

#### **ACO Clinical Practice Guidelines**

#### **ACO Advisories**

#### **ACO Code of Ethics**

- The ACO Code of Ethics is established under Section 133 of the *Health Professions Act*. This code sets forth the basic moral and ethical principles for the profession of Optometry and serves as a moral guide to which all optometrists are committed. It also informs the public of the ethical principles by which professional behavior is assessed.

#### **ACO Standards of Practice**

- The ACO Standards of Practice are also established under Section 133 of the *Health Professions Act*. They are considered the minimum standard of professional behavior that ensures that all optometrists provide safe, competent and ethical professional services to all patients at all times. These standards are to be interpreted in conjunction with the ACO Code of Ethics, the Guidelines to the ACO Standards of Practice, ACO Clinical Practice Guidelines and the ACO Advisories.

#### **Guidelines to the ACO Standards of Practice**

- The Guidelines to the ACO Standards of Practice provides a more detailed guide as to the scope of services that an optometrist is authorized to provide and the manner in which the optometrist provides those services. It is incumbent upon each practitioner to exercise professional judgment and discretion when determining the individual needs of each patient at that moment in time.

#### **ACO Clinical Practice Guidelines**

- The ACO Clinical Practice Guidelines provide guidance to Doctors of Optometry on clearly defined diagnostic, management and treatment regimens for specific areas of practice. They are based on the best available and most current optometric and medical clinical evidence and research.

#### **ACO Advisories**

- The ACO Advisories are meant to provide guidance to members on business and other activities not covered in any of the above categories.

Standards of Practice, Guidelines to the ACO Standards of Practice, Clinical Practice Guidelines and Advisories are in constant evolution to reflect advances in optometric and medical science, development of innovative technology, updates to legislated scope of practice and certification of new competencies.

## Purpose, Criteria & Goals

### ACO Continuing Competence Program

The ***purpose*** of the Alberta College of Optometrist's Continuing Competence Program is to:

- Measure, assess and enhance the knowledge, skill and judgment of practicing optometrists.
- Ensure each practitioner meets the prevailing ACO Standards of Practice, Guidelines to the ACO Standards of Practice, ACO Clinical Practice Guidelines and ACO Advisories required to provide appropriate vision care to each patient.
- Set an expectation that each member will practice in accordance with the ACO Code of Ethics.

The program is designed to work within the following ***criteria***:

- To be effective, valid, accurate, honest and unbiased.
- To be reliable, repeatable, accountable and measurable.
- To be flexible and non-threatening.
- To be educational and contemporary.

The ***goals*** of the program are that every optometrist will:

- Maintain the competence, knowledge and skills he/she needs to provide safe, skilled and competent health care services to the public.
- Continually enhance the quality and delivery of optometric services.
- Ensure each Regulated Member's continuing educational development.



The preferred outcomes of the ACO Continuing Competence Program include:

- Increased capacity for Doctors of Optometry to provide patient-centered care, work cooperatively in interdisciplinary teams, employ evidence-based practice and utilize appropriate informatics.
- Improved health care outcomes.
- Individual commitment by all Regulated Members to life-long learning and quality of care improvement.

## Core Competencies

Competence has many complex and intertwined components. How a practitioner utilizes their clinical knowledge, skills and information technology to arrive at an appropriate decision and be able to communicate that decision to a patient is the cornerstone to appropriate patient health outcomes.

### 1. Clinical Knowledge and Skills

The acquisition and maintenance of appropriate clinical knowledge and clinical skills is essential to ensure practitioners are knowledgeable, competent and skilled when providing health care services. The basic premise of this category is the understanding that the patient has the right to assume an optometrist will perform any reasonable test, with the patient's consent, in order to appropriately detect and diagnose disorders, conditions and/or diseases. It is not the patient's duty to request a specific test; however, it is the optometrist's responsibility to perform all necessary procedures for that particular patient at that moment in time or refer the patient to another practitioner for further care.

### 2. Practitioner Behavior

The completion of the same, standardized list of tests for all patients is not considered appropriate behavior. Practitioners must customize the tests and techniques performed during an eye examination based on what the patient presents to them at that moment in time and how they respond to these tests.

The patient also has the right to assume that the optometrist will explain all possible treatment choices and engage the patient in the decision process. The ability to communicate verbally, in writing or in any other appropriate manner with other professionals, ancillary personnel, patients and care givers is paramount to ensuring that patients understand their condition(s) and comply with recommended treatments.

### 3. Information Technology (IT)

Electronic Medical Records (EMR's), diagnostic instrumentation, treatment procedures and tele-optometry health care options are in constant evolution. It is incumbent on each practitioner to stay abreast of new and innovative technologies that may improve patient health outcomes. Legible patient charts, prescriptions and concise referral reports to other professionals comprise some of the other communication elements of this category. Utilization of appropriate IT allows practitioners to more efficiently and effectively manage patient conditions and communicate appropriately.

### 3. Professional Decision Making

One of the attributes of a doctoral-level, prescribing health care practitioner is the ability to gather and synthesize all available information to be able to arrive at decisions that appropriately address the patient's conditions and concerns.

## Participation and Administration

As per Guideline 1.3.1a, participation in the ACO Continuing Competence Program is mandatory for all Regulated Members.

The Alberta College of Optometrists Council reviews the ACO Continuing Competence Program on a regular basis to ensure that the committee member training, administration, member selection process, assessment tools and appeal process are fair, accurate, valid, reliable, accountable, confidential and transparent.

The ACO Competence Committee is responsible for:

- The performance of assessments and the rendering of a decision on all Practice Visits and Chart Reviews.
- Reviewing the entire program on a regular basis and making appropriate suggestions to the ACO Council on potential improvements to the program.
- Drafting an Annual Report to the members that would be included in the ACO Annual General Meeting Report.
- Drafting a report that would be included in the ACO Annual Report to Government.

The ACO staff are responsible for:

- The day-to-day administration of the program.
- Using the Selection Tool to select which practitioners will be reviewed.
- Assigning specific reviewers to individual Practice Visits. Additionally, working with the ACO Competence Committee Chair to assign a new reviewer to a Practice Visit or Chart Review when a conflict of interest has been identified in the original selection of the reviewer.
- Ensuring that individual Regulated Members are properly notified of their Practice Visit and that they receive appropriate feedback on the results of their assessment.
- Compiling the results of the post-Practice Visit/Chart Review survey.
- Entering all Category 1 Continuing Education credits for each Regulated Member.
- Administering all other assessment tools used in the program.
- Coordinating the hearing of all appeals by either the Competence Committee or the ACO Council.

The ACO Council is responsible for:

- Reviewing, discussing and rendering final decisions on changes or revisions to the ACO Continuing Competency Program.
- Acting as an Appeal Body for those Regulated Members who wish to appeal:
  - The manner in which a review was conducted or the decision of the ACO Competence Committee on their Practice Visit or Chart Review.
  - The recognition of Continuing Education Credits.

## Assessment Tools

Currently, the ACO Continuing Competence Committee is authorized to utilize the following assessment tools:

- Facility and clinic self-assessment questionnaires
- On-site Practice Visits or remote patient Chart Reviews
- Post-assessment surveys
- Verification of active time in clinical practice
- Continuing Education Credits
- On-line competence assessments and learning management systems
- Certification of new skills and competencies

### 1. Facility and Clinic Self -Assessment Questionnaire

In advance of each Practice Visit or Chart Review, all practitioners who were selected for a review must complete the ACO Part 1 Review Form (self-assessment review).

This form allows each practitioner to specifically review their clinic facility, signage, letterhead, marketing and promotion activities, professional equipment, infection prevention and control protocols, supervision of office staff and required legislative documents. This completed form is then jointly reviewed during the on-site Practice Visit or remote patient Chart Review by the practitioner and reviewer.

### 2. Patient Chart Assessment

The assessment of patient records forms an integral part of the ACO competence assessment process. The primary goal is to assess the clinical knowledge, skills and decision-making ability of the practitioner. This assessment may be performed in-person or remotely depending on the ability of a reviewer to physically attend the practitioner's clinic. The college decides which process is most appropriate to use and informs the practitioner in their Notification Letter.

- On-site Practice Visit – the reviewer will select patient charts at random ensuring that they gather a good cross-section of eye conditions, patient ages, in-office management, treatment procedures, referrals, etc. for review.
- Remote patient Chart Review – the practitioner selects a variety of patient charts to submit, ensuring that they cover a wide range of eye conditions, patient ages, etc. (as requested by the committee).

### 3. Post-Review Survey

To assist the ACO Competence Committee and ACO Council in reviewing the effectiveness of the ACO Continuing Competence Program, post-review surveys are sent to all members who completed a review.



### **3. Verification of Active Time in Practice**

Currently, each Regulated Member is required to practice a minimum of 750 hours in each 3-year competency period. This amount is pro-rated for those practitioners who register with the ACO in year 2 (500 hours) and those who register in year 3 (250 hours) of the 3-year competency period.

Verification of active practice will occur during the member's on-site Practice Visit or remote Chart Review.

### **4. Verification of Continuing Education Credits**

The Alberta College of Optometrists recognizes that competent and skilled practitioners require lifelong educational and learning experiences in a variety of settings that contribute to their continuing professional development and assist in the maintenance of their competence throughout their careers.

All Regulated Members must obtain a minimum of 150 Continuing Education credits in each 3 (consecutive year) competency period in a manner, type and number as detailed in the ACO Continuing Competence Program Manual, Continuing Education requirements.

### **5. Online Learning Management Systems**

Online learning management systems (such as the Optometry 5in5 Program) are used by many health professions to connect with their members on a regular basis outside of Practice Visits, Chart Reviews or self-assessment processes. These programs are designed to:

- Allow practitioners to individually assess their competence in specific areas.
- Allow the ACO to identify potential competency gaps in the membership.

### **6. Certification of New Competencies**

As the legislated scope of practice for optometry evolves and expands on a regular basis, the ACO has historically mandated that all Regulated Members pass a rigorous certification program before being authorized to perform these newly legislated activities.

The ACO continually reviews, investigates and researches competence assessment tools and Continuing Competence Program requirements used by other health care regulatory organizations to ensure that:

- Our assessment tools and program requirements are appropriate, valid, comprehensive and contemporary.
- We continually improve the identification and remediation of those members who potentially may be at higher risk to patients.

## Continuing Education Requirements

As mentioned previously, the Alberta College of Optometrists (ACO) recognizes that competent and skilled practitioners require lifelong educational and learning experiences in a variety of settings that contribute to their continuing professional development.

Since its formal inception in 1890, the profession of optometry has undergone continual advancement and development. With the continual evolution of optometric knowledge, skills and clinical practice; all optometrists understand that it is their duty to add knowledge, maintain skills and participate in learning experiences that promote excellence in the delivery of vision care services to the public throughout their careers.

The types of learning activities approved by the ACO include:

### **Category 1 - Traditional & Self-Directed Continuing Education Activities**

- a) COPE and ACCME accredited courses
- b) Courses sponsored by a COPE accredited provider, or, an approved local, provincial or national optometric organization
- c) Approved courses by other health care organizations or governments
- d) Approved electronic or internet courses
- e) CPR certification or re-certification – 4 CE Credits
- f) Approved faculty and appointed teaching positions
- g) Approved research activities
- h) Attendance at hospital ophthalmic rounds or clinical workshops
- i) Approved clinical study groups
- j) Approved self-directed study activities
- k) Completion of an approved residency or fellowship program
- l) Preparation and publication of a journal article or case report
- m) Preparation and presentation of a lecture, wetlab or workshop
- n) Reviewing ophthalmic articles, courses or books (electronic or paper) that have a final exam requirement
- o) Other educational activities approved by the Registrar

### **Category 2 - Optometric Appointments and General Activities**

- a) Working on ACO or AAO Council or Committees
- b) Working as an assessor, at a workshop or on a committee of the Optometry Examining Board of Canada (OEBC).
- c) Product information courses by ophthalmic companies
- d) Attendance at the ACO and AAO Annual General Meetings
- e) Attendance at ACO and/or AAO sessions
- f) Participation in a Competence Committee practice review
- g) Supervision of an optometry student extern or intern
- h) Volunteer optometric service
- i) Reviewing ophthalmic articles, courses or books (electronic or paper) that do not have a final exam requirement
- j) Other educational activities approved by the Registrar

## **Program Specifics:**

- The first ACO 3-year competency period ran from January 1, 2012 to December 31, 2014. Subsequent 3-year competency periods will follow in successive 3-year cycles afterwards.
- The ACO requires that all regulated members earn a minimum of 150 Continuing Education credits in each 3-year competency period. However:
  - Regulated Members who register before the 2<sup>nd</sup> year of the 3-year ACO competency period will require 100 Continuing Education Credits.
  - Regulated Members who register before the final year of the 3-year ACO competency period will require 50 Continuing Education credits.
- A Regulated Members' competency period starts on the January 1 following registration with the ACO; however, CE credits that are earned in the period of time from registration with the ACO and the start of their first competency period (the January 1 following registration) may be carried forward to their first competency period (to a maximum of 50 carry-over CE Credits).
- If a regulated member earns more than 150 CE credits in any 3-year competency period, a maximum of 50 CE credits will be carried forward to their next 3-year competency period.
- Each regulated member must complete a minimum of 30 CE credits in each of the first two years during each full competency period.
- Learning experiences acquired before registration such as optometry school programs, bridging programs, writing the national board exam or with respect to passing other ACO registration requirements are not allowed for CE credits.
- Should an extension to complete mandatory CE credits or a modification of CE content be requested (for any reason); a written request must be forwarded to the ACO Council for discussion. The decision of the ACO Council is considered final.
- Each individual learning experience is allowed to be counted only once in each 3-year competency period.

## **Category Restrictions:**

### **Category 1**

- 2 CE credits are awarded for each hour of education.
- Unlimited credit is allowed in this category.
- Official verification of attendance must be forwarded to the ACO office.

### **Category 2**

- 1 CE credit is awarded for each hour of education.
- A maximum of 75 CE credits in each 3-year competency period is allowed for activities in this category.
- Verification of attendance must be retained by the practitioner.

## Practice Visit & Patient Chart Review Program Logistics

Twice a year (February and August), the ACO office prepares a list of practitioners who have been selected for a Practice Visit or Chart Review. This selection process includes:

- All newly registered practitioners (new graduates or new transfers to our province) are automatically entered into the selection system to have a review within their first year of practice in Alberta.
- All currently registered optometrists who failed their previous Practice Visit or Chart Review are automatically reviewed within 180 days. Optometrists who subsequently receive a satisfactory decision on their 180-day Practice Visit or Chart Review are then reviewed in 4-5 years' time. Optometrists who fail their 180-day Practice Visit or Chart Review are automatically referred to the ACO Complaints Director.
- Regulated Members who fall in the "higher risk" category as determined by the ACO Selection Tool (a statistical analysis of all previous Practice Visits and Chart Reviews in our province).
- All other currently registered optometrists are reviewed on a regular schedule. Those who previously received two satisfactory Practice Visit or Chart Review decisions in a row are reviewed in 8-10 years' time. All others are reviewed in 4-5 years' time.

Once a member has been selected:

- They are randomly matched with a specific member of the ACO Competence Committee.
- They are sent a Notification of Selection Letter of their selection and the name of the potential reviewer. The member has 30 days to request a different reviewer due to any real or perceived conflicts with the reviewer. If a different reviewer is requested, the Competence Committee Chair will assign a new reviewer and the member must accept the new reviewer assignment.
- The member is also sent a copy of Part 1 – Self-Assessment Form to complete before the date of their review.
- Once the 30-day limit has passed, all Competence Committee reviewers are sent a list of their reviews and asked to identify any possible conflict such as family member, business partner and any other reason that might influence their ability to conduct a fair, accurate and honest review.
- If no conflicts are identified, the reviewer is asked to communicate with the optometrist to set up a mutually convenient date and time.
- Once the member and reviewer have agreed on a mutually suitable date and time, the reviewer notifies the college office so that an official Notification of Review Letter can be sent to both parties. At this time, the college office may also send out other instructional information to the member regarding the collection of a suitable number and the required types of patient records.

During the Practice Visit or Chart Review, the reviewer:

- Will review the members completed Part 1 Form (self-assessment) to verify the members answers.
- Will ask the member to select patient charts at random. In addition to routine eye examinations, the reviewer may also ask the member to select specific types of charts such as glaucoma, contact lenses, low vision, vision therapy, eye emergencies, referrals, etc. in order to gain a better appreciation for the members scope of practice. These charts are reviewed together.
- May enter and inspect any clinic where the member provides professional services, including any other satellite offices and locations.
- May interview a member about his/her professional services and observe the member providing professional services, providing the patient gives consent.
- May interview clinic staff regarding their duties, supervision by the optometrist and other areas relating to the review.
- May interview or survey patients, clients, office consultants, staff and co-workers about the provision of professional services.
- Will review, examine and copy documents including patient records, referral letters, statements, appointment books and any other items that are related to the provision of professional services by the member (whether or not that specific item is under the control or custodianship of the member).
- Will assess the safety and condition of equipment and other technology used by the member in the provision of professional services.

The reviewer will respect the confidentiality of any information reviewed whether it be patient personal information, business information or any information concerning the practitioner, in accordance with the confidentiality rules of the Health Professions Act, other privacy legislation and the Alberta College of Optometrists Privacy Policy.



Decisions regarding the member's competence will not be made by the reviewer during the on-site Practice Visit or Chart Review, as it is the Competence Committee as a whole which will make this determination during a Competence Committee meeting.

In order to preserve anonymity and eliminate any potential bias, all reviewed members will be identified by a numerical identifier (and not their Practice Permit number) when the practice review information and patient charts are presented to the entire committee. Following an in-depth discussion and review of all material, the Competence Committee has the following options:

- Satisfactory Review Letter #1 – No changes are required in the member's practice.
- Satisfactory Review Letter #2 – The member will immediately make the itemized changes and no further follow-up is required.
- Satisfactory Review Letter #3 – The member will immediately make the itemized changes and send written confirmation to the ACO office within 30 days of their decision letter that these changes have been made. Failure to submit written confirmation within the 30-day limit will result in immediate referral to the ACO Complaints Director for further action.
- Unsatisfactory Review Letter #4 – The member will immediately make the itemized changes and be scheduled for a follow-up review within 180 days of their decision letter. The Competence Committee chair will designate a different reviewer to conduct the follow-up review. If a member does not receive a satisfactory grade on their follow-up review, they are immediately referred to the ACO Complaints Director for further action.
- Unsatisfactory Review Letter #5 – The member will be immediately referred to the ACO Complaints Director for further action.

All Practice Visits and Chart Reviews are conducted at no direct cost to the member except for 180-day follow-up reviews and any additional Practice Visits or Chart Reviews ordered by the ACO Complaints Director or Hearing Tribunal which are billed directly to the member (Per Diem and travel costs).

Members will be advised of the Competence Committee's recommendations within 90 days of their Practice Visit or Chart Review.

Failure to comply with the Competence Committee recommendations may result in further mandatory actions on the part of the practitioner, including successful completion of a written exam, attendance at a specified continuing education program, completion of a Certification Course, restrictions to their practice of optometry or referral to the ACO Complaints Director.

## Appeals

In order to achieve an appropriate level of fairness, transparency and conduct, all Regulated Members have five (5) possible avenues of appeal:

- Members who perceive or are aware of a conflict of interest with the assignment of a specific reviewer for the purpose of a Practice Visit or Chart Review may apply to the **Chair of the ACO Competence Committee** for a reassignment of the reviewer. The member must contact the ACO office with their request and the nature of the conflict no later than 30 days after the Notification of Review letter has been sent and before any review is conducted. The member must accept the new reviewer assignment.
- Members who wish to challenge the decision of the Registrar regarding the recognition of Continuing Education credits may apply to the **Council of the Alberta College of Optometrists**. Appeals must be submitted in writing and received no later than 30 days after notification is sent regarding the member's Continuing Education credits being refused or revised.
- Members who wish to challenge the amount of active practice assigned to them may appeal to the **Council of the Alberta College of Optometrists**. Appeals must be submitted in writing no later than 30 days after being notified of not meeting the minimum 750 hours of practice in each 3-year competency period.
- Members who wish to challenge the manner in which a Practice Visit or Chart Review was conducted by a member of the Competence Committee may appeal to the **Council of the Alberta College of Optometrists**. These appeals must be submitted in writing to the ACO, no later than 14 days from the date the Practice Visit or Chart Review was conducted.
- Members who wish to challenge the decision of the Competence Committee following notification of the committee's decision may appeal to the **Council of the Alberta College of Optometrists**. These appeals must be submitted in writing to the ACO no more than 30 days after the date of the decision letter regarding the Competence Committee's decision of that member's Practice Visit or Chart Review.

## Competence Committee Communication

The Competence Committee will publish an Annual Report to the members and an Annual Report to government (summarized tabulations of the general performance results of the membership as a whole). In this manner, the assessment process and member requirements of the Continuing Competence Program will be constantly monitored and adjusted to provide for improvement where and when necessary.