

STANDARDS OF PRACTICE

QUALITY ASSURANCE – SELF-ASSESSMENTS & ON-SITE APPRAISALS

Name:	Quality Assurance – Self Assessments & On-Site Appraisals
Date Approved:	06/22/2018
Date Updated:	09/14/2019 02/08/2020 07/08/2020
Number:	SP-C-19
Type:	Clinical Standards (C)
Reference:	<p>Professional Bylaws Section (3.2):</p> <p>(3.2) To be eligible for licensure, an applicant must have the knowledge, skills and abilities that are substantially equivalent to the standard of academic or technical achievement and competencies as outlined in these bylaws:</p> <p>(a) Has demonstrated the applicant's skills and knowledge through an assessment in such form as may be established by the Council;</p> <p>(8.1) Professional Misconduct</p> <p>(m) refuses to allow a member or members of the appraisal committee or other authorized representative of the Council of the Association to enter at a reasonable time the office and premises in which the member is engaged in the practice of optometry for the purpose of examining and assessing the members' standards of practice, their professional records and their instruments.</p> <p>(n) fails to comply with any recommendation of the appraisal committee where such recommendations have been approved by Council.</p> <p>04.11.18 MOTION "To accept the 2018 Quality Assurance Self-Appraisal with the minor changes in the red font." CARRIED.</p> <p>04.11.18 MOTION "To accept the processes of providing a consistent request for additional information." CARRIED.</p> <p>04.11.18 MOTION "To accept the processes of providing a consistent acknowledgement the appraisal was satisfactory and no further action is required." CARRIED.</p> <p>04.11.18 MOTION "To pay an honorarium of \$150 to the reviewer of the Quality Assurance Self-Assessment." CARRIED.</p> <p>06.22.18 MOTION "New members will complete a Quality Assurance Assessment within five years of being licensed in Saskatchewan." CARRIED.</p> <p>03.15.19 MOTION "To Task the Board of Examiners with conducting periodic reviews of member websites and member Google Ads to ensure members are advertising within Standards of Practice." CARRIED.</p> <p>02.08.20 MOTION "To remove the requirement to review Google Ads from the Website QAA review process." CARRIED.</p> <p>02.08.20 MOTION "To amend POLICY GP-25 Quality Assurance Assessments & On-Site Appraisals to a STANDARD OF PRACTICE SP-C-19 Quality Assurance Assessments & On-Site Appraisals." CARRIED.</p> <p>07.08.20 MOTION "To approve STANDARD OF PRACTICE SP-C-19 Quality Assurance Assessments & On-Site Appraisals." CARRIED.</p> <p>12.01.2021 MOTION "To amend STANDARD OF PRACTICE SP-C-19 Quality Assurance – Self Assessments & On-Site Appraisals." CARRIED.</p>

The purpose of Quality Assurance Self-Assessments and On-Site Appraisals are three-fold:

- To assess the overall quality and level of care rendered by optometrists in Saskatchewan, providing assurance that minimum standards are being observed by all practitioners.
- To identify trends including any areas where standards of practice, guidelines and policies can be developed/improved and/or to identify areas where further continuing education would be beneficial.
- To assess individual practitioners over time to ensure that minimum standards are being met throughout a practitioner's career.

Please note: As a regulatory body the Association is obligated to ensure members are following The Optometry Act, 1985, The Optometric Professional Bylaws, and the Standards of Practice. Although the purpose of the Quality Assurance Self-Assessments and On-Site Appraisals are designed to be supportive and educational. However, deficiencies in meeting acceptable standards, failure to complete assessments and appraisals, or failure to comply with recommendations can result in investigative and disciplinary action.

Frequency

Members will participate in a Self-Assessment or On-Site Appraisal at least once every 10 years. New members will be required to complete a Self-Assessment and/or On-Site Appraisal within their first five years following licensure. Participation in the Quality Assurance process is a licensing requirement in Saskatchewan.

The Council, members of the Mediation Committee, and/or members of the Appraisal Committee may recommend a member for an initial or follow-up Self-Assessment and/or On-Site Appraisal in the event a member was the subject of one or more complaints and/or was identified internally for non-compliance or partial compliance with requirements outlined in the SAO Act, Bylaws, or Standards of Practice.

Completing a Self-Assessment or On-Site Appraisal when requested by the Registrar, Deputy Registrar, Associate Registrar or the Association is a condition of maintaining a license to practice in Saskatchewan.

The SAO will maintain a master list of members and the dates that members last participated in a Self-Assessment and/or On-Site Appraisal.

Member Process

Quality Assurance Self-Assessments

The Association office will inform members when they will be required to complete a Self-Assessment. Completion of the self-assessment requires the comprehensive completion of the

Quality Assurance Self-Assessment document(s) and the submission of the complete document(s) and all necessary additional files to the Association office.

Members will be granted a maximum of four weeks after a Self-Assessment has been requested to complete and submit their Self-Assessment to the Association office as directed. Members may apply to the Registrar for an extension if circumstances are warranted. In the event an extension is not approved, and the member does not provide their completed self-assessment within the four weeks, the member will be considered to be in contravention of Section 3.2 (a) of the Professional Bylaws and per 3.3 could result in the Registrar withholding the granting of a license or license renewal.

Members will be required to sign a declaration stating their information is complete and accurate in all respects and that the records are true copies of authentic records of patients that were examined within their practice. It is the responsibility of members to redact all identifying patient information including but not limited to: name, full birthdate, address, health card numbers, etc. A patient's age or year of birth only should be included as it may be a relevant factor in treatment plan and/or billing.

Quality Assurance On-Site Appraisals

Members who have been identified for an On-Site Appraisal will be given advance notice of the date of the review and the name and contact information of the person(s) conducting the on-site appraisal.

Members who have been identified for an On-Site Appraisal are required to provide any and all reasonable access and requested documentation to the reviewer.

Failure to comply with a request for an On-Site Appraisal when provided with sufficient notice will be deemed to be a contravention of Section 3.2 (a) and 8.1 (m) of the Bylaws and could result in the Registrar withholding the granting of a license or license renewal (Section 3.3 Bylaws) or an investigation of professional misconduct (Section 7 Bylaws).

In the event an On-Site Appraisal is requested in relation to a specific concern or complaint, the on-site appraisal may be adapted to review the area relevant to the concern or complaint.

Review Process

Further to the Professional Bylaws Section (3.2) and Policy C-3, members of the appraisal committee will be appointed the authority to conduct and review Self-Assessments and On-Site Appraisals. They shall be appointed and granted full authority by Council to examine records relating to patient care and office management, may enter the office and premises of a member at a reasonable time to observe a member in the performance of professional duties, may examine any instrumentation and documentation, and may conduct any tests or audits.

Appraisal committee members will be provided with advance notice the names of one or more members to review as part of a Self-Assessment and/or On-Site Appraisal process. Each Appraisal committee member must confirm that they are not aware of a conflict of interest and that their practice is not in direct and local competition with the member selected for the review.

The Appraisal Committee shall conduct/review the Assessment / Appraisal documentation and provide a written report to the Association office for the member's file within fifteen business days of the conclusion of the Assessment / Appraisal. The Association office will then forward a copy of the Appraisal Committee member's report to the appointed Deputy Registrar or Associate Registrar.

Under the Signature of the Associate or Deputy Registrar, the member will be provided with written correspondence with the results of their QAA Assessments / Appraisals within thirty business days of receipt of the findings from the Appraisal Committee.

The Association office retains records of all conducted Self-Assessments and On-Site Appraisals in each member's permanent file.

Actions and Grading

Once the Self-Assessment or On-Site Appraisal have been reviewed by the Appraisal Committee member they will be reviewed by the Deputy or Associate Registrar and graded. There are four (4) types of grading:

1. Satisfactory – no identified deficiencies
2. Satisfactory – minor deficiencies requiring constructive feedback or further clarification
3. Not Satisfactory – did not meet expectations due to multiple minor deficiencies and/or more large deficiencies and correction is required. Submission of materials or reporting to the Deputy or Associate Registrar on specific matters on specified dates will be required. This may include the completion of an on-site appraisal.
4. Not Satisfactory – did not meet expectations and due to the extent or seriousness an immediate referral to the mediation committee is deemed necessary.

For any assessments or appraisals that may be deemed as not satisfactory/did not meet expectations both the Associate and Deputy Registrar (or another member of Council in the event of a conflict) will review the assessment/appraisal and come to a consensus.

Members will be provided with a letter from the Deputy or Associate Registrar notifying them of the outcome of their assessment/appraisal and any specific concerns. If the concerns noted can be effectively addressed and do not pose a risk to patients, practitioners may be given the opportunity to correct deficiencies. To ensure deficiencies have been corrected, the member will be required to provide proof through submission of materials on specified matters on specified dates and/or the completion of an additional Self-Assessment or On-Site Appraisal within a specified timeframe.

If the supporting materials or a second assessment/appraisal does not meet expectations, the matter may be directed to the mediation committee. If a member fails to comply with requests

from the Deputy or Associate Registrar to comply with the SAO Act, Bylaws or Standards of Practice, the matter will be directed to the mediation committee for further review.

At any stage of the process if a serious concern or an action placing the public at risk is identified, the mediation committee must be notified immediately in writing, and further steps will be taken in accordance with the legislation.