

PART IX QUALITY ASSURANCE

DEFINITIONS

23. In this Part,

"assessor" means an assessor appointed under section 81 of the Health Professions Procedural Code; Optometry Act, 1991 - O. Reg. 119/94

"clinical ability" means, in relation to a member, the member's knowledge, skills and judgment relating to practising optometry;

"Committee" means the Quality Assurance Committee;

"deficiencies in the member's practice" means one or more aspects of the member's practice that are not in accordance with the standards of practice of the profession;

"deficient clinical ability" means, in relation to a member, a level of knowledge, skills or judgment that makes the member's clinical performance unsatisfactory;

"remedial program" means a specific education program that a member is required to undertake for the purpose of correcting deficient clinical ability. O. Reg. 250/99, s. 2.

QUALITY ASSURANCE PROGRAM: OBJECTS AND COMPONENTS

24. The objects of the quality assurance program, which is administered by the Committee, are to maintain and enhance the knowledge, skills and judgment of members so that appropriate care of high quality is provided to the public. O. Reg. 250/99, s. 2.

25. The quality assurance program shall include the following components:

1. A mandatory continuing education component.
2. An assessment component to appraise the practice of members.
3. An evaluation component to evaluate a member's clinical ability.
4. A remedial component to assist a member in correcting any deficiencies in the member's practice or clinical ability.
5. A component to assist in appraising the practice or evaluating the clinical ability of an applicant for registration when referred by the Registration Committee or the Registrar.
6. A component to provide for assessment and rehabilitation of a member who has allegedly exhibited inappropriate behaviour or made inappropriate remarks of a sexual nature towards a patient.
7. A component to obtain information from members to assist the Committee in carrying out the program's objects. O. Reg. 250/99, s. 2.

MANDATORY CONTINUING EDUCATION

26. (1) Every member shall participate in a mandatory continuing education program established and administered by the Committee. O. Reg. 250/99, s. 2.

(2) The requirements of the program and any changes to them shall be approved by the Council, published by the College and distributed to the members. O. Reg. 250/99, s. 2.

PRACTICE ASSESSMENT

27. (1) A member is required to undergo a practice assessment if,

- (a) the member's name is selected at random in accordance with the random sampling process approved by the Council, published by the College and distributed to the members;
- (b) the member is referred to the Committee by the Registrar pursuant to subsection 8 (2) of Ontario Regulation 837/93; or
- (c) the member is referred to the Committee by the Complaints Committee, Discipline Committee or Executive Committee. O. Reg. 250/99, s. 2.

(2) An assessment shall include the inspection and assessment of the member's records of the care of patients and other records required to be maintained under the regulations under the Act, and may include, but is not limited to, an inspection of the member's office or offices and requiring the member to respond to a practice questionnaire. O. Reg. 250/99, s. 2.

(3) A written report shall be prepared in relation to the assessment of a member's practice. O. Reg. 250/99, s. 2.

(4) The Committee shall provide a copy of the report to the member and notify the member in writing of the right to make written submissions provided under subsection (5). O. Reg. 250/99, s. 2.

(5) A member who receives a report under subsection (4) may make written submissions to the Committee within 14 days after receiving the report. O. Reg. 250/99, s. 2.

(6) The Committee may, after considering an assessment report, any other information that the Committee considers relevant to the assessment and the member's written submissions, if any, decide,

- (a) that no further action is required; or
- (b) that there are deficiencies in the member's practice. O. Reg. 250/99, s. 2.

(7) If the Committee determines that there are deficiencies in the member's practice, the Committee shall,

- (a) make written recommendations to the member on ways to correct the deficiencies and give the member an opportunity to correct them;
- (b) subject to section 29, require the member to successfully complete within the time specified by the Committee continuing education activities approved by the Committee to assist in the correction of deficiencies in the member's practice; or

(c) subject to section 29, require the member to undergo an evaluation of the member's clinical ability. O. Reg. 250/99, s. 2.

(8) If the Committee acts under clause (7) (a) and the member has had an opportunity to correct the deficiencies, the Committee may require the member to undergo a reassessment of the practice, and subsections (2), (3), (4), (5), (6) and (7) apply to the reassessment. O. Reg. 250/99, s. 2.

(9) If the Committee acts under clause (7) (b), the Committee,
(a) may require the member to undergo a reassessment of the practice before the completion of the continuing education activities; and
(b) shall require the member to undergo a reassessment of the practice after completion of the continuing education activities. O. Reg. 250/99, s. 2.

(10) Subsections (2), (3), (4), (5), (6) and (7) apply to a reassessment under subsection (9). O. Reg. 250/99, s. 2.

(11) The Committee may not require more than two reassessments under this section. O. Reg. 250/99, s. 2.

EVALUATION OF MEMBER'S CLINICAL ABILITY

28. (1) If the Committee requires a member to undergo an evaluation of his or her clinical ability under clause 27 (7) (c), the Committee shall appoint a person or persons to carry out the evaluation. O. Reg. 250/99, s. 2.

(2) The evaluation may include,
(a) requiring the member to answer, orally or in writing, questions that relate to practicing optometry;
(b) requiring the member to answer, orally or in writing, questions that arise from a review of real or simulated patient charts;
(c) requiring the member to examine persons or clinical simulations exhibiting problems that relate to practising optometry; and
(d) requiring the member to demonstrate the application of optometric techniques. O. Reg. 250/99, s. 2.

(3) The person or persons shall prepare a written report and submit it to the Committee. O. Reg. 250/99, s. 2.

(4) After receiving the report, the Committee shall provide a copy of the report to the member and notify the member in writing of the right to make written submissions provided under subsection (5). O. Reg. 250/99, s. 2.

(5) A member who receives a report under subsection (4) may make written submissions to the Committee within 14 days after receiving the report. O. Reg. 250/99, s. 2.

(6) After considering the evaluation report, the assessment report, other information the Committee considers relevant to the evaluation and the member's written submissions, if any, the Committee may decide,

(a) that the deficiencies in the member's practice were not the result of deficient clinical ability; or

(b) that the member has deficient clinical ability. O. Reg. 250/99, s. 2.

(7) If the Committee decides that the deficiencies in the member's practice are not the result of deficient clinical ability, it may,

(a) make written recommendations to the member on ways to correct the deficiencies in the member's practice and give the member an opportunity to correct them; or

(b) subject to section 29, require the member to successfully complete within the time specified by the Committee continuing education activities approved by the Committee to assist in the correction of deficiencies in the member's practice. O. Reg. 250/99, s. 2.

(8) If the Committee decides that the member has deficient clinical ability, it may,

(a) make written recommendations to the member on ways to correct the deficiencies and give him or her an opportunity to correct them; or

(b) subject to section 29, require the member to complete a remedial program approved by the Committee, within the time specified by the Committee; or

(c) subject to section 29 and subsection 30 (1), direct the Registrar to impose terms, conditions or limitations on the member's certificate of registration for a specified period not exceeding six months. O. Reg. 250/99, s. 2.

(9) If the Committee acts under clause (7) (a) or (8) (a) and the member has had an opportunity to correct the deficiencies, the Committee may require the member to undergo a reassessment of the practice, and subsections 27 (2), (3), (4), (5), (6) and (7) apply to the reassessment. O. Reg. 250/99, s. 2.

(10) At such time as it determines after the member has completed the continuing education activities required under clause (7) (b) or the remedial program required under clause (8) (b), the Committee may require the member to undergo a reassessment of the practice, and subsections 27 (2), (3), (4), (5), (6) and (7) apply to the reassessment. O. Reg. 250/99, s. 2.

(11) If the Committee takes action under subsection (8) and the member has had an opportunity to correct the deficiencies, completed or had the opportunity to complete a remedial program or had terms, conditions or limitations placed on his or her certificate of registration under this section, the Committee may require the member to undergo a re-evaluation, and the provisions of this section apply with necessary modifications to such a re-evaluation. O. Reg. 250/99, s. 2.

(12) The Committee may not require more than two reassessments under each of subsections (9) and (10) and more than one re-evaluation under subsection (11). O. Reg. 250/99, s. 2.

29. (1) The Committee shall not take action under clause 27 (7) (b) or (c), clause 28 (7) (b) or clause 28 (8) (b) or (c) unless it gives the member,

- (a) written notice that, in the Committee's opinion, there are deficiencies in the member's practice or that the member has deficient clinical ability;
- (b) a copy of all reports and other documents that the Committee considered in forming its opinion;
- (c) at least 14 days after receiving the notice to make written submissions to the Committee; and
- (d) if the member so requests in writing within 14 days after receiving the notice, an opportunity to confer with the Committee. O. Reg. 250/99, s. 2.

(2) After considering any submissions, whether written or oral, the Committee shall decide what action to take and, if it decides to take action under the provisions referred to in subsection (1), shall forward its written decision, with reasons, to the member. O. Reg. 250/99, s. 2.

IMPOSITION OF TERMS, CONDITIONS OR LIMITATIONS ON A MEMBER'S CERTIFICATE OF REGISTRATION

30. (1) Subject to subsection (4), the Committee may direct the Registrar to impose terms, conditions or limitations on the member's certificate of registration for a specified period not exceeding six months if,

- (a) the Committee decides that the member has deficient clinical ability; or
- (b) the member has failed to successfully complete a remedial program within the period of time specified by the Committee. O. Reg. 250/99, s. 2.

(2) If the Committee has given a direction under subsection (1), it may give another direction for a second specified period not exceeding six months but it may not give a third direction for a further period of time. O. Reg. 250/99, s. 2.

(3) The Committee may direct the Registrar to remove any of the terms, conditions or limitations that have been imposed before the end of the period if it is satisfied that the member's knowledge, skills and judgment are satisfactory. O. Reg. 250/99, s. 2.

(4) The Committee shall not direct the Registrar under subsection (1) unless the member has been given,

- (a) notice of the Committee's intention to direct the Registrar and of the reasons it believes the direction should be given;
- (b) a copy of all reports and other documents that have been considered by the Committee in connection with the matter;
- (c) at least 30 days after receiving the notice under clause (a) to make written submissions to the Committee; and
- (d) if the member makes such a request in writing within 30 days after receiving the notice, an opportunity to confer with the Committee. O. Reg. 250/99, s. 2.

APPLICANTS FOR REGISTRATION

31. (1) If a person is applying for registration, the Committee shall, on the request of the Registration Committee or the Registrar, review the applicant's patient records and any other records the Committee considers appropriate in order to assess the applicant's ability to practice in accordance with the standards of practice in Ontario. O. Reg. 250/99, s. 2.

(2) An assessor appointed by the Committee may assist it with the review. O. Reg. 250/99, s. 2.

(3) The Committee shall provide a written report of the results of its review to the Registrar, or to the Registration Committee if the latter requested the review. O. Reg. 250/99, s. 2.

(4) The Registrar shall provide a copy of the report to the applicant. O. Reg. 250/99, s. 2.

32. (1) If a person is applying for registration to practise, the Committee shall, on the request of the Registration Committee or the Registrar, ensure that an evaluation of the applicant's clinical ability is carried out. O. Reg. 250/99, s. 2.

(2) The Committee shall appoint a person or persons to carry out the evaluation. O. Reg. 250/99, s. 2.

(3) The evaluation may include,

(a) requiring the applicant to answer, orally or in writing, questions that relate to practising optometry;

(b) requiring the applicant to answer, orally or in writing, questions that arise from the review of real or simulated patient charts;

(c) requiring the applicant to examine persons or clinical simulations exhibiting problems that relate to practising optometry; and

(d) requiring the applicant to demonstrate the application of optometric techniques. O. Reg. 250/99, s. 2.

(4) The person or persons shall prepare a written report and submit it to the Committee. O. Reg. 250/99, s. 2.

(5) The Committee shall provide a written evaluation of the results of its review to the Registrar, or to the Registration Committee if the latter requested the review. O. Reg. 250/99, s. 2.

(6) The Registrar shall provide a copy of the evaluation to the applicant. O. Reg. 250/99, s. 2.

MEASURES FOLLOWING ALLEGED BEHAVIOUR OR REMARKS OF A SEXUAL NATURE

33. (1) The Committee may require a member to undergo a psychological assessment or other assessment specified by the Committee if a matter respecting the member is referred to the Committee,

(a) by a panel of the Complaints Committee acting under paragraph 4 of subsection 26 (2) of the Health Professions Procedural Code with respect to clause (c) of the definition of "sexual abuse" in subsection 1 (3) of the Code; or

(b) by the Executive Committee, the Complaints Committee or the Board under section 79.1 of the Code. O. Reg. 250/99, s. 2.

(2) The Committee may require a member to undertake and complete within a specified time a measure specified by the Committee, such as education, therapy or counselling, if,

(a) the Committee has received a report of an assessment of a member required by the

Committee under subsection (1); and

(b) the Committee is satisfied that the member suffers from an emotional or personality condition that may adversely affect his or her professional behaviour. O. Reg. 250/99, s. 2.

(3) The Committee shall not take action under subsection (2) unless it gives the member,

(a) a copy of the report of the assessment;

(b) written notice of the measure the Committee intends to require;

(c) at least 14 days after receiving the notice to make written submissions to the Committee; and

(d) if the member so requests in writing within 14 days after receiving the notice, an opportunity to confer with the Committee. O. Reg. 250/99, s. 2.

(4) Subject to subsection (5), the Committee may direct the Registrar to impose terms, conditions or limitations on a member's certificate of registration for a specified period not exceeding six months if,

(a) the member refuses to undergo an assessment under subsection (1);

(b) the member refuses to undertake or complete the measure required by the Committee or complete it within the specified time; or

(c) the Committee has been advised that the condition is not likely to be remediable and is of the opinion that the member's condition has exposed or is likely to expose the member's patients to harm or injury. O. Reg. 250/99, s. 2.

(5) No direction shall be given to the Registrar under subsection (4) unless,

(a) the member has been given notice of the Committee's intention to give the direction and of the reasons it believes the direction should be given;

(b) the member has been given a copy of all reports and other documents that have been considered by the Committee in connection with the matter;

(c) the member has been given at least 30 days after receiving the notice and documents under this subsection to make written submissions to the Committee; and

(d) if the member so requests in writing within 30 days after receiving the notice and documents under this subsection, the opportunity to confer with the Committee. O. Reg. 250/99, s. 2.

(6) The Committee may direct the Registrar to remove any of the terms, conditions or limitations imposed on a member's certificate of registration under this section before the end of the specified period if the Committee is satisfied that they are no longer needed. O. Reg. 250/99, s. 2.

(7) The following shall not be used as evidence that the member has committed an act of professional misconduct:

1. Any admission by the member to the Committee or to a person conducting an assessment under subsection (1) of exhibiting behaviour or making remarks of a sexual nature.

2. The results of any assessment undergone by the member under subsection (1) or measures undertaken under subsection (2). O. Reg. 250/99, s. 2.

(8) If terms, conditions or limitations are imposed on a member's certificate of registration under this section, the Committee shall report the matter to the Executive Committee. O. Reg. 250/99, s. 2.

INFORMATION

34. (1) At the Committee's request, the Registrar shall forward to the members a request for information from members in order to assist the Committee in carrying out the objects of the quality assurance program. O. Reg. 250/99, s. 2.

(2) Members shall provide the Registrar with accurate information in response to the request within 30 days of receiving it. O. Reg. 250/99, s. 2.