



Jurisprudence

Module 3 – Quality Assurance

In this module you will learn about

- The goal of quality assurance programs
- What the *Regulated Health Professions Act* requires a quality assurance program to include
- The role of the Quality Assurance Committee

The components of the CMRITO's Quality Assurance (QA) Program, including

- QA annual declaration
- QA Portfolio
- Peer and practice assessment

Resources to include with Module 3

- QA regulation under the MRIT Act
<https://www.ontario.ca/laws/regulation/120375>
- Quality Assurance Program
<https://www.cmrito.org/pdfs/qa-resources/qa-program.pdf>



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Module 3 – Quality Assurance

One of the key components of the self-regulation of the profession of medical radiation and imaging technology in the public interest is the Quality Assurance (QA) Program.

As regulated health professionals, registrants are accountable to maintain competence in their current area of practice and continually improve their competence in order to respond to changes in practice environments, advances in technology and the changing health care environment. The goal of the College of Medical Radiation and Imaging Technologists of Ontario (CMRITO) QA Program is to assure the public of the quality of practice of medical radiation and imaging technology by maintaining registrants' performance at a level that meets the profession's standards of practice and by promoting continuing competence and continuing improvement among registrants.

Because the profession of medical radiation and imaging technology is constantly changing, registrants' professional roles, responsibilities and accountabilities differ today from those of yesterday, and will continue to evolve in the future.

The CMRITO QA Program:

- complies with the legislative requirement of the *Regulated Health Professions Act* (RHPA) that the CMRITO establish and maintain a QA program
- is consistent with the CMRITO's mandate to regulate the profession of medical radiation and imaging technology to protect the public interest
- encourages registrants to take seriously their professional responsibility to ensure their continuing competence and quality improvement in a changing environment
- provides an opportunity for registrants to control and direct their own continuing education and professional development

The QA Program also provides registrants with a method of demonstrating compliance with the CMRITO Practice Standard 8, Continuing Competence.

Role of the QA Committee

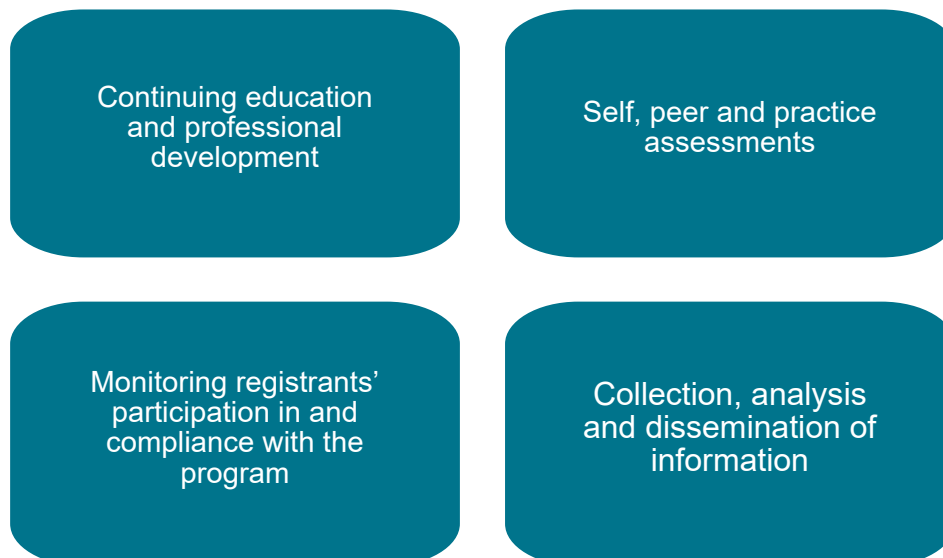
The role of the QA Committee is to administer the QA Program in accordance with the RHPA and the QA regulation under the *Medical Radiation and Imaging Technology Act, 2017* (MRIT Act) and any other applicable law.

The QA Committee is one of the CMRITO's statutory committees, and is comprised of Council members (professional and public) and CMRITO registrants who have been appointed to the Committee. Members of the QA Committee are required to keep all information about registrants' QA records confidential, except under certain circumstances set out in the legislation. In most cases, the QA Committee is satisfied with registrants' QA records. However, after assessing a registrant's QA records, if the QA Committee is not satisfied, they can require a registrant to complete their QA records, require a registrant to participate in one or more specified continuing education or professional development activities, or refer a registrant for a peer and practice assessment.

The QA Committee may also provide the name of the registrant and allegations against the registrant to the Inquires, Complaints and Reports Committee (ICRC) if the QA Committee is of the opinion that the registrant may have committed an act of professional misconduct, or may be incompetent or incapacitated. For example, failure to co-operate with the QA Committee and failure to comply with a requirement of the QA Committee is considered professional misconduct.

QA Program Overview

The quality assurance regulation made under the MRIT Act states that the QA Program must have the following four components:



1. Continuing education or professional development designed to,
 - a. Promote continuing competence and continuing quality improvement among the registrants
 - b. Address changes in practice environments
 - c. Incorporate standards of practice, advances in technology, changes made to entry to practice competencies and other relevant issues at the discretion of the Council
2. Self, peer and practice assessments
3. A mechanism for the CMRITO to monitor registrants' participation in and compliance with the program
4. The collection, analysis and dissemination of information

The CMRITO QA Program is based on the assumption that registrants come into the CMRITO with appropriate skills and knowledge acquired through approved educational programs and that these initial competencies are maintained through lifelong learning and the expectation of adherence to the standards of practice. The QA Program is based on the principles of adult education. This approach allows registrants to choose activities based on their individual learning needs and style, resources available, and acknowledges that learning comes from engaging in a variety of activities.

The CMRITO QA Program includes the following elements:

Quality Assurance Declaration

- Completed each year by every registrant at the time of their annual renewal of registration
- Registrants confirm whether they have complied with and understand the requirements of the QA Program
- This element complies with the legislative requirement that the CMRITO have a mechanism to monitor registrants' participation in, and compliance with, the QA Program

Quality Assurance Portfolio

- Completed each calendar year by every registrant
- Each registrant is required to complete and record at least 25 hours of continuing education and professional development activities each year
- A registrant may be requested to submit their portfolio for assessment by the CMRITO Quality Assurance Committee (QA Committee)

Peer and Practice Assessment by means of an assessor

- Completed by individual registrants selected by the QA Committee in accordance with the QA regulation
- This assessment involves a peer assessor interviewing a registrant regarding specific components of their practice, based on the Standards of Practice
- A report of this assessment is prepared by the assessor, a copy of which is provided to the QA Committee and the registrant