

MEMBER NAME:

STATUS: ACTIVE INACTIVE

MEMBER NO:

CATEGORY: GEN LTD GRAD

CERTO PROFESSIONAL PORTFOLIO

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FOR THE 12 MONTH PERIOD

BEGINNING

& ENDING

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INTRODUCTION

Your Professional Portfolio is for you, about you, and will be as unique as you are. The Portfolio provides you with one complete package in which to document the professional and personal experiences and accomplishments that have helped to make you the committed Respiratory Therapist you are today.

By guiding you through a reflective process, the Portfolio is designed to assist you in your professional development by identifying your individual learning needs.

How often do I have to do this?

Members are required to maintain their Professional Portfolios on an on-going basis. The College believes that most Members are actually assessing, planning, and implementing learning on an almost daily basis. Many Members however, are not in the habit of regularly documenting their learning.

For the purposes of meeting College requirements, you are required to identify at least ONE Learning Goal every 12-months. The beginning and ending dates of that 12-month cycle however, are up to you to determine, i.e., January to December, March to February. Although you get to choose the Learning Goal, it should be a new Learning Goal each year – the idea is to acquire new knowledge, not simply maintain existing levels of knowledge.

Why do I have to do this?

The *Regulated Health Professions Act* (RHPA) outlines that each regulatory College must develop, implement and maintain a Quality Assurance (QA) Program for its Members. The specifics are listed in the Quality Assurance Regulation (O.Reg. 596/94 Part VI) made under the Respiratory Therapy Act.

Participation in the QA Program is not optional - all members of the CRTO, regardless of their category of registration, are required to participate in the QA Program and provide evidence of this if requested by a Panel of the QA Committee.

SUGGESTIONS

- ▼ A little planning goes a long way! Use your day-planner, pocket notebook, PDA or your preferred personal organizer to jot down your day-to-day activities. Then simply enter the information into your Learning Log once a month.
- ▼ Use point form.
- ▼ Record your information in the format that is most convenient for you – hand written, Word®, etc.
- ▼ Take note of the minimum requirements and Assessment Criteria (separate document).
- ▼ Incorporate existing tools; i.e. CSRT NCPD, employer learning plans/educational programs, etc.
- ▼ Recognize that the Self-Assessment is intended to be a “needs” assessment which helps you to identify your Learning Goals.
- ▼ Shaded areas marked “Comments/Notes” are provided for your convenience only, and are not required fields.
- ▼ List re-certifications, such as BCLS, ACLS, NRP and hospital-based certification programs for Advanced Prescribed Procedures Below the Dermis (e.g. arterial line insertions, etc.) in your Learning Log.

Supporting documentation:

You are not required to submit supporting documentation with this Professional Portfolio form when it is initially requested. However, a Panel of the Quality Assurance Committee and/or its appointed Reviewers may request that you forward your documentation if they have any questions about your Learning Goal(s).

While not all Learning Goals will have supporting documentation it would be appropriate to retain the following:

- ▼ certificates of attendance,
- ▼ course outlines,
- ▼ diplomas or other similar materials.
- ▼ references and/or descriptions are only needed for articles and documents.

SETTING YOUR LEARNING GOALS

When it comes to completing the four steps of the Professional Portfolio, many of you tell us that you have the most difficulty writing your Goals in a way that makes them easy to assess in Step 4: Self-Evaluation. For example, if you write a Goal that says something like, “*I want to learn more about COPD,*” you may have a difficult time describing how you know that you did, in fact, “learn more”.

It helps to phrase your Learning Goal with the desired behaviour change in mind. Writing a goal that includes a change in behaviour will go a long way in helping you to measure, at the end of the cycle, whether or not you have actually achieved your Learning Goal.

Using our example from above, re-writing that goal to say “*I want to describe and apply respiratory rehab principles as they relate to patients with COPD*” will make evaluating your achievements easier.

Here are some action verbs to help you describe behaviour:

KNOWLEDGE	SKILL	ATTITUDES
Analyze Compare/Contrast Define Describe Differentiate Identify Interpret Plan Summarize Explain Apply	Address Assemble Collect Communicate Demonstrate Establish Maintain Modify Organize	Accept Adopt Advocate Challenge Choose Evaluate Justify Recommend Specify

Another helpful idea is to apply the **SMART** acronym to your Goal. Ask yourself if your Learning Goal is:

Specific: Is your Learning Goal focused on a particular subject?

Measurable: Will you be able to measure or evaluate your learning once you have completed your learning plan, or is your goal too vague or ambiguous?

Achievable: Will you be able to complete your Learning Goal? Are you feeling overwhelmed at the thought of trying to complete it, or can you foresee achieving what you set out to do?

Realistic: Is your Learning Goal practical taking into consideration your work and family commitments, practice environment and the rationale for why you want to learn about this topic?

Timely: Will you be able to complete your Goal within the 12 month time period? Is your Learning Goal reasonable for the length of time identified?

If you can answer “yes” to each of these, you should be able to answer the questions at each step of the Portfolio more easily. Here are two examples of Learning Goals that are SMART:

1. “My Learning Goal is to define and describe ‘conscious sedation’ with respect to indications/contraindications, patient selection, equipment required, medications required, monitoring requirements and management of complications.”
2. “My Learning Goal is to identify and ultimately recommend to the ER physicians any new evidence-based treatments/interventions for the treatment of acute asthma in the emergency department.”

HERE IS AN EXAMPLE OF THE 4-STEP PROCESS:

PERSONAL PROFILE:

I’m a staff therapist working in a small community-based hospital. My responsibilities include covering ICU, wards/ER, cardiac arrest pager. I rotate through the PFT lab occasionally. I work in a department that does not have a manager but does have a Professional Practice Leader (PPL). Each therapist on staff assists with some administrative duties and helps research practice issues with the PPL. I have worked as an RRT for 7 years.

STEP 1: SELF-ASSESSMENT/LEARNING NEEDS ASSESSMENT

I have reflected on my scope of practice and identified my learning needs.

STEP 2: PLANNING

1. a) My Learning Goal for this 12 month period is to:
 - ▼ Describe a pandemic influenza outbreak.
 - ▼ Describe the predicted overall effect of a pandemic flu outbreak in my community.
 - ▼ Identify some of the main effects of a pandemic on RT practice at my facility.
 - ▼ Describe and recommend some strategies for dealing with a pandemic at my facility.

- b) My rationale for choosing this Learning Goal is that this is a current issue in health care that will require RT input and consultation. I feel it is necessary as a practicing RT in acute care to fully understand the impact and consequences of an influenza pandemic and be able to contribute my expertise towards developing a plan to ensure that we are prepared to deal with the patients who become ill during the pandemic.

2. I plan on meeting my Learning Goal by doing the following:
 - ▼ Literature search on influenza pandemic (PubMed)
 - ▼ Review published pandemic plans from various sources such as Ministry of Health, Health Canada, CDC.
 - ▼ Contact my facility's committee (or contact person) who is responsible for pandemic planning.
 - ▼ Contact RT colleagues/peers to see what they are doing or have done about pandemic planning at their site.
 - ▼ Start a discussion thread on this subject on the CSRT's practice/management listserv to determine how other RTs are dealing with this matter.

3. I plan on meeting this Learning Goal in the next 6 months.

STEP 3: IMPLEMENTATION

- ▼ Literature search completed.
- ▼ Reviewed Ontario's Ministry of Health pandemic plan – posted on their website.
- ▼ Became a member of my facility's Pandemic Planning Committee.
- ▼ Spoke with RT colleagues at 4 different sites – they shared their approach to the planning.
- ▼ Started a discussion thread on the CSRT listserv

I met my Learning Goal ahead of time – completed it in 5 months.

STEP 4: SELF-EVALUATION

1. I have learned the following:
 - ▼ Influenza pandemic is long overdue – planning is being done on a global basis to try and be prepared to deal with the consequences
 - ▼ Influenza Pandemic will be widespread across Ontario, will have far reaching effect on RT practice – loss of RT staff (due to illness), ICU resources will be max'd out, will in all likelihood be a shortage of ventilators and other RT equipment.
 - ▼ RTs will be a scarce resource during the pandemic
2. The approach I took to meet my Learning Goal was very effective for me. I was able to acquire a great deal of information that has been published and readily available on the internet. The networking with my RT colleagues was invaluable and has developed into an informal working group trying to deal with specific RT issues surrounding an influenza outbreak.
3. The learning I've obtained will have a direct impact on my practice when the pandemic hits. I've been able to have RT-related issues written into our facility's pandemic plan.
4. This process has led me to set another goal related to pandemic planning. I will continue to research this issue but on a broader scale – i.e. how to effectively utilize RT resources (whether they be human or equipment) during an influenza pandemic.

NOTES:

PERSONAL PROFILE

This is the section that gives you the opportunity to list your personal and professional achievements. You may choose to substitute your current résumé for this section. You should review this information annually and revise it as changes necessitate.

1. CURRENT EMPLOYMENT INFORMATION (REQUIRED)

NAME OF EMPLOYER

JOB TITLE

YEARS OF EMPLOYMENT

JOB RESPONSIBILITIES

2. RESPIRATORY THERAPY EDUCATIONAL BACKGROUND (REQUIRED)

EDUCATIONAL INSTITUTION

YEAR OF GRADUATION

3. OPTIONAL

DETAILED JOB DESCRIPTION

PROFESSIONAL AFFILIATIONS

PERFORMANCE APPRAISALS

OUTLINE OF PRESENTATIONS GIVEN

LETTERS OF REFERENCE

ARTICLES PUBLISHED

THANK YOU LETTERS FROM PATIENTS
OR CLIENTS

OTHER PERSONAL OR PROFESSIONAL
ACHIEVEMENTS

LIST OF VOLUNTEER ACTIVITIES

SCOPE OF PRACTICE (REQUIRED)

By indicating your Scope of Practice, it may help you to reflect on your role as an RT and you may be able to identify areas or issues about which you would like to learn. This will also assist the Reviewer in linking your Learning Goal to your role and how it may ultimately benefit your patients/clients.

To clearly identify for the Reviewer the areas of practice in which you work, and the types of patients/clients you serve, please complete the following tables:

Areas of Practice

C = current A = anticipated

	C	A		C	A
PRIMARY CARE: i.e. health promotion, disease prevention activities provided in community health centre, MDs office	<input type="checkbox"/>	<input type="checkbox"/>	CHRONIC CARE: i.e. general patient care given to a patient requiring long term care	<input type="checkbox"/>	<input type="checkbox"/>
ACUTE/CRITICAL CARE: i.e. critical care and emergency care activities provided in ICU, CCU, NICU, PICU, OR or ER	<input type="checkbox"/>	<input type="checkbox"/>	SUB-ACUTE CARE: i.e. general patient care activities that are post acute or pre chronic/long term	<input type="checkbox"/>	<input type="checkbox"/>
Adults	<input type="checkbox"/>	<input type="checkbox"/>	Seniors	<input type="checkbox"/>	<input type="checkbox"/>
Paediatric	<input type="checkbox"/>	<input type="checkbox"/>	Neonatal	<input type="checkbox"/>	<input type="checkbox"/>
Home care	<input type="checkbox"/>	<input type="checkbox"/>	Rehabilitation	<input type="checkbox"/>	<input type="checkbox"/>
Equipment service / maintenance	<input type="checkbox"/>	<input type="checkbox"/>	Research	<input type="checkbox"/>	<input type="checkbox"/>
Administration / management / clinical leader	<input type="checkbox"/>	<input type="checkbox"/>	Sales	<input type="checkbox"/>	<input type="checkbox"/>
Anaesthesia	<input type="checkbox"/>	<input type="checkbox"/>	Patient Education	<input type="checkbox"/>	<input type="checkbox"/>
Consulting	<input type="checkbox"/>	<input type="checkbox"/>	Health Care Professional Education	<input type="checkbox"/>	<input type="checkbox"/>
Diagnostics - cardiac	<input type="checkbox"/>	<input type="checkbox"/>	Diagnostics - pulmonary	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

Non-Direct Patient Care Activities

	C	A		C	A
Computer input and/or retrieve information	<input type="checkbox"/>	<input type="checkbox"/>	Sales & Marketing	<input type="checkbox"/>	<input type="checkbox"/>
Computer – operate computerized equipment	<input type="checkbox"/>	<input type="checkbox"/>	Presentations (internal or external)	<input type="checkbox"/>	<input type="checkbox"/>
Equipment – quality control protocols	<input type="checkbox"/>	<input type="checkbox"/>	Administrative responsibilities	<input type="checkbox"/>	<input type="checkbox"/>
Equipment – preventative maintenance	<input type="checkbox"/>	<input type="checkbox"/>	Development of Policies/Procedures	<input type="checkbox"/>	<input type="checkbox"/>
Equipment repair	<input type="checkbox"/>	<input type="checkbox"/>	Project Management	<input type="checkbox"/>	<input type="checkbox"/>
Literature searches	<input type="checkbox"/>	<input type="checkbox"/>	Consulting	<input type="checkbox"/>	<input type="checkbox"/>
Teaching	<input type="checkbox"/>	<input type="checkbox"/>	Research	<input type="checkbox"/>	<input type="checkbox"/>
Management / supervisory duties	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>
Performance appraisals of staff	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

Direct Patient Care Activities

C = current A = anticipated

	C	A		C	A
Arterial puncture	<input type="checkbox"/>	<input type="checkbox"/>	Bronchoprovocation Studies(Methacholine or Histamine)	<input type="checkbox"/>	<input type="checkbox"/>
Aspiration from a cannula/ line	<input type="checkbox"/>	<input type="checkbox"/>	Mechanical Ventilation	<input type="checkbox"/>	<input type="checkbox"/>
Blood analysis	<input type="checkbox"/>	<input type="checkbox"/>	Hyperbarics	<input type="checkbox"/>	<input type="checkbox"/>
Capillary puncture	<input type="checkbox"/>	<input type="checkbox"/>	Nitric Oxide administration	<input type="checkbox"/>	<input type="checkbox"/>
Cardiovascular perfusion / ECMO	<input type="checkbox"/>	<input type="checkbox"/>	Anesthetic agents or gases	<input type="checkbox"/>	<input type="checkbox"/>
Chest assessments	<input type="checkbox"/>	<input type="checkbox"/>	Direct injection	<input type="checkbox"/>	<input type="checkbox"/>
Defibrillation / cardioversion	<input type="checkbox"/>	<input type="checkbox"/>	Injection via line or bag	<input type="checkbox"/>	<input type="checkbox"/>
Pulmonary function testing	<input type="checkbox"/>	<input type="checkbox"/>	Intubation in adults, paediatrics or neonates	<input type="checkbox"/>	<input type="checkbox"/>
Polysomnography	<input type="checkbox"/>	<input type="checkbox"/>	Patient transport to and/or from a facility	<input type="checkbox"/>	<input type="checkbox"/>
ECG testing	<input type="checkbox"/>	<input type="checkbox"/>	Suctioning	<input type="checkbox"/>	<input type="checkbox"/>
Stress testing	<input type="checkbox"/>	<input type="checkbox"/>	Suturing an indwelling cannula/ line	<input type="checkbox"/>	<input type="checkbox"/>
Holter monitoring	<input type="checkbox"/>	<input type="checkbox"/>	Patient teaching	<input type="checkbox"/>	<input type="checkbox"/>
Echocardiography	<input type="checkbox"/>	<input type="checkbox"/>	Tracheostomy tube change	<input type="checkbox"/>	<input type="checkbox"/>
Neurodiagnostics (including EMG, EEG)	<input type="checkbox"/>	<input type="checkbox"/>	Venipuncture	<input type="checkbox"/>	<input type="checkbox"/>
Other: _____	<input type="checkbox"/>	<input type="checkbox"/>	Other: _____	<input type="checkbox"/>	<input type="checkbox"/>

ADVANCED PRESCRIBED PROCEDURES BELOW THE DERMIS

Requiring CRTO-Approved Certification Programs

	C	A
Insertion of a cannula: venous, arterial, umbilical	<input type="checkbox"/>	<input type="checkbox"/>
Chest tube insertion, manipulation, aspiration or removal	<input type="checkbox"/>	<input type="checkbox"/>
Chest needle insertion, manipulation, aspiration or removal	<input type="checkbox"/>	<input type="checkbox"/>

Delegation of Authorized Acts

Delegating Respiratory Therapy Authorized Acts		C	A	Accepting Delegation of Controlled Acts		C	A
To:	Act or procedure	<input type="checkbox"/>	<input type="checkbox"/>	From:	Act or procedure	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>			<input type="checkbox"/>	<input type="checkbox"/>

CONTINUOUS LEARNING LOG:

This chart is designed to assist you in capturing your day-to-day learning activities. You may wish to list:

- ▼ articles or documents you read,
- ▼ inservices you attend,
- ▼ conferences you go to,
- ▼ courses you take,
- ▼ re-certification programs (e.g. ACLS, PALS, arterial lines, etc.)
- ▼ any other item you believe to be relevant to your practice.

We encourage you to try and accurately capture all of your continuing education activities in this Learning Log. This is your opportunity to demonstrate to the College, and ultimately to the public of Ontario, how active you are in continuing education. At a minimum, you are required to list at least 12 learning activities over a 12-month period.

You are not required to keep documentation to support the activities listed within the Learning Log, however, ***if an activity supports a Learning Goal***, then you should retain course outlines, certificates of attendance, copies of presentations or agendas, etc.

Date of Activity	Activity	Subject/Title/Comments

STEP 1: SELF-ASSESSMENT / LEARNING NEEDS ASSESSMENT

The purpose of doing a Self-Assessment / Learning Needs Assessment is to assist you in identifying your personal Learning Goal. In this section we have provided you with a list of College standards, guidelines and legislation in addition to broad practice related issues to help in this reflective process.

The information below has been formatted as a questionnaire to assist you in determining your understanding of the following documents or subject areas. This may help in determining a Learning Goal in the next step.

1. Legislation, Regulation & Standards

As a regulated health professional you are responsible for familiarizing yourself with the legislation and standards that govern your practice. While you are not expected to memorize these documents, you should be able to address how these affect Respiratory Therapy in general and your practice specifically.

Where can you find all of these documents? All Ontario statutes and regulations can be viewed on-line at <http://www.e-laws.gov.on.ca/>, and all College documents such as standards and Professional Practice Guidelines are available directly from the CRTO or on-line at <http://www.crto.on.ca/>.

How to use the following table: Reflect upon each of the listed documents / subjects below and consider if you are familiar with how the document, (legislation, regulation, standard) affects your practice. If you are unsure of its affect you may want to incorporate that subject into a Learning Goal. We have also included sub-questions within each document to help you in determining your level of knowledge of each.

Please Note: you are not required to document your response.

Reviewed/ Reflected Upon	Document	Are you familiar with the document and do you understand how it affects your practice?
	Regulated Health Professions Act, 1991 (RHPA) Q. Do you know how many controlled acts are listed in the RHPA?	Comments/Notes
	Health Care Consent Act, 1996 Q. Does consent need to be in writing?	
	The Respiratory Therapy Act, 1991 Q. Can you list the RT authorized acts? Can you list who an RT can accept a medical order from?	
	REGULATIONS	
	Ontario Regulation 753/93, Professional Misconduct (1999) Q. Would it be considered to be professional misconduct to accept a gift from vendor?	
	Ontario Regulation 596/94: * please note that Parts I, II and IV have been revoked	

Reviewed/ Reflected Upon	Document	Are you familiar with the document and do you understand how it affects your practice?
	REGULATIONS CONTINUED	Comments/Notes
	Part III - Advertising (1997) Q. Can you include a patient testimonial in an advertisement about your practice?	
	Part V - Notice of Meeting and Hearings (1997) Q. Does the College have to advertise the dates of upcoming Council meetings?	
	Part VI - Quality Assurance (1999) Q. Do you know how often do you need to participate in the QA program of the CRTO?	
	Part VII - Prescribed Procedures (1999) Q. Are graduate members permitted to perform advanced prescribed procedures below the dermis?	
	Part VIII - Registration (1999) Q. Do you know what is required to return to active practice?	
	CRTO By-laws Q. Do you know what College information about you can be released to the public upon request?	
	Standards of Practice – 2004 Q. Are you professionally accountable to practice in accordance with these standards?	
	POSITION STATEMENTS	
	i. Sexual Abuse of Patients/Clients Q. Does the College have a zero tolerance for patient/client sexual abuse?	
	ii. Skill Development Q. Do you know what is required to upgrade your skills?	
	iii. Members' Responsibilities to the Public of Ontario Q. What does the term "standards of practice" include?	
	iv. Medical Directives and the Ordering of Controlled Acts – 2004 Q. Do you know what constitutes a legally sound medical directive?	
	v. Bloodborne Pathogens Q. Are you obligated to disclose your serologic status to your patients if positive to HIV, HepB, or HepC?	
	COLLEGE POLICIES	
	Professional Liability Insurance: Q. Do you need to purchase your own professional liability insurance?	
	Supervision Policy. Q. Are you able to describe what is meant by direct and indirect supervision?	
	PROFESSIONAL PRACTICE GUIDELINES	
	i. Prevention of Abuse of Patients/Clients Q. Do you know your reporting obligations?	
	ii. Responsibilities Under Consent Legislation Q. Do you know the priority ranking for substitute decision makers?	
	iii. Conflict of Interest Q. Can you provide services to your patient/client if you are in a conflict of interest?	
	iv. Certification Programs for Advance Prescribed Procedures Below the Dermis Q. Can you list the 3 advanced prescribed procedures? Are you able to describe what you need to do if you want to perform these 3 advanced prescribed procedures?	

Reviewed/ Reflected Upon	Document	Are you familiar with the document and do you understand how it affects your practice?	
PROFESSIONAL PRACTICE GUIDELINES CONTINUED		Comments/Notes	
	v. Registration and Use of Title Q. What is required to be on your name badge?		
	vi. Interpretation of Authorized Acts Q. Is NG tube insertion considered to fall under one of our authorized acts?		
	vii. Delegation of Controlled Acts Q. Are you able to describe to a colleague which of the RT authorized acts you are permitted to delegate to others? Are you able to identify the controlled acts of which you may accept delegation?		
	viii. Documentation Q. Do you know how to document late entries?		
	ix. Orders for Medical Care Q. Do you know who you can accept a medical order from?		
	x. Responsibilities of Members as Educators Q. Do you know what authorized acts students are permitted to perform?		
	xi. Dispensing Medications Q. Do you know from whom you may accept delegation to perform this controlled act not authorized to CRTO members?		
Other related pieces of legislation: Depending on your specific area of practice you may also be affected by additional standards and pieces of legislation and should be aware of which ones apply to you.			
Respiratory therapists working in the home care field may refer to: <ul style="list-style-type: none"> ▼ <i>Homes for the Aged and Rest Homes Act;</i> ▼ <i>Homes for Special Care Act;</i> ▼ <i>Nursing Homes Act;</i> ▼ <i>CSA Guide for the Safe Storage, Handling and Use of Portable Oxygen Systems in Home, Domiciliary and Healthcare Settings</i> 			
Managers in hospitals should refer to: <ul style="list-style-type: none"> ▼ <i>Public Hospitals Act;</i> ▼ <i>Regulation 346/01 under the Public Hospitals Act – Hospital Management</i> 			

2. Practice Issues

Mandatory Reporting

Ontario law requires the mandatory reporting of information under certain circumstances. As a regulated health professional it is your professional obligation to understand your responsibilities with respect to the following: (you may refer to the CRTO Information Sheets on reporting obligations with respect to termination and sexual abuse)

- a) sexual abuse of patients (Regulated Health Professions Act, sections 85.1 to 85.4)
- b) termination of employment – applicable to supervisors & managers (Regulated Health Professions Act, sections 85.5 to 85.6)
- c) child abuse (Child and Family Services Act, section 72)

When doing your Self-Assessment / Learning Needs Assessment you may find it helpful to consider your interaction with other health care professionals regarding the following topics. From this you may recall a discussion or event, which triggers you to investigate/learn about a certain issue therefore leading you to a Learning Goal. Consider your current and anticipated scope of practice.

ITEM	COMMENTS / DESCRIPTION OF INTERACTION
<p>Are you currently participating in CQI activities within your organization that may lead to a Learning Goal?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Are there current patient care issues affecting your specific clients that you want/need to learn more about?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Are there Professional issues that you are interested in learning more about that could become your learning goal for this coming year?</p> <p><i>Example:</i> are you involved in pandemic influenza planning at your facility?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Are you interested in learning more about certain ethical issues that affect your practice?</p> <p><i>Example:</i> "living wills" or advanced directives?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Are you currently involved in Committee work related to professional affairs that has highlighted an area you would like to learn more about?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Are you participating in Committee work on Council or on a statutory committee of the College that might lead to the development of a learning goal?</p> <p><i>Example:</i> participated on a working group for the development of a Practice Guideline</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Have you attended a conference or annual meeting of a professional organization recently that has raised your interest in a particular topic?</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>
<p>Other: _____</p>	<p><input type="checkbox"/> Yes <input type="checkbox"/> No</p>

3. Have you reflected on your scope of practice and identified your learning needs? (required)

Yes No

STEP 2: PLANNING

GOAL # _____

COPY and complete steps 2, 3 and 4 for each Learning Goal

This is the section of your portfolio where you plan what learning you would like to accomplish this year. Your review and self-reflection during the assessment step (Step 1) will have helped you identify any areas that you would like to gain increased knowledge.

1. a) Based on the results of my Self-Assessment/Learning Needs Assessment, and my current and anticipated scope of practice, I have identified the following Learning Goal; **a minimum of one Goal per year should be identified.**

- b) Provide a brief **rationale** for the Learning Goal you have chosen. How is this Learning Goal related to your practice & how might it improve patient care?

2. I am planning on meeting my Learning Goal by doing the following activities and/or utilizing the following resources. Consider how you prefer to learn as you plan what activities may be required – this will help you to identify resources that will work best for you. For example, classroom or distance education courses, on-line research, reading journal articles, attending in-services, etc. (Please list activities.)

3. It is a good idea to set a deadline for yourself in order to encourage completion of the Learning Goal. I anticipate completing this Learning Goal by the following date:

(If you are unable to achieve the target date you anticipated above, you may wish to choose a new target date.)

STEP 3: IMPLEMENTATION

GOAL # _____

Please describe how you implemented your learning plan and what (if any) documentation you have gathered to support your learning activities.



Date Learning Goal was met: _____

(If your Goal has not been completed within the year, please refer to Step 4 and complete an Interim Evaluation.)

STEP 4: SELF-EVALUATION

GOAL # _____

Self-Evaluation is an important component of your Portfolio. The purpose of this Step is for you to reflect and consider how effective your learning plan/activities were, and ultimately whether or not you met your Learning Goal. If you did meet your Learning Goal, it is important to reflect on how this has, or will affect your practice in respiratory therapy. This process follows the principle of Continuous Quality Improvement (CQI) and as such, requires an evaluative component. Describing what you have learned and reflecting on the process will complete the CQI Cycle.

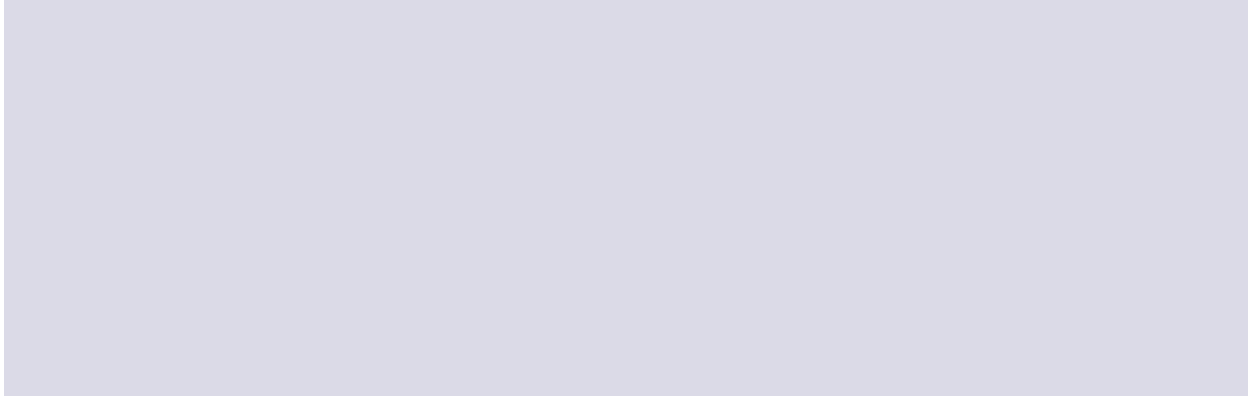
Self-Evaluation is required *at least annually*, or at the completion of each Learning Goal. This means that if you have not completed your Learning Goal at the end of the year you need to provide an Interim Evaluation that outlines the progress you have made to date. Whenever you complete your Learning Goal you should provide a Final Evaluation at that time.

Interim Evaluation **Final Evaluation**

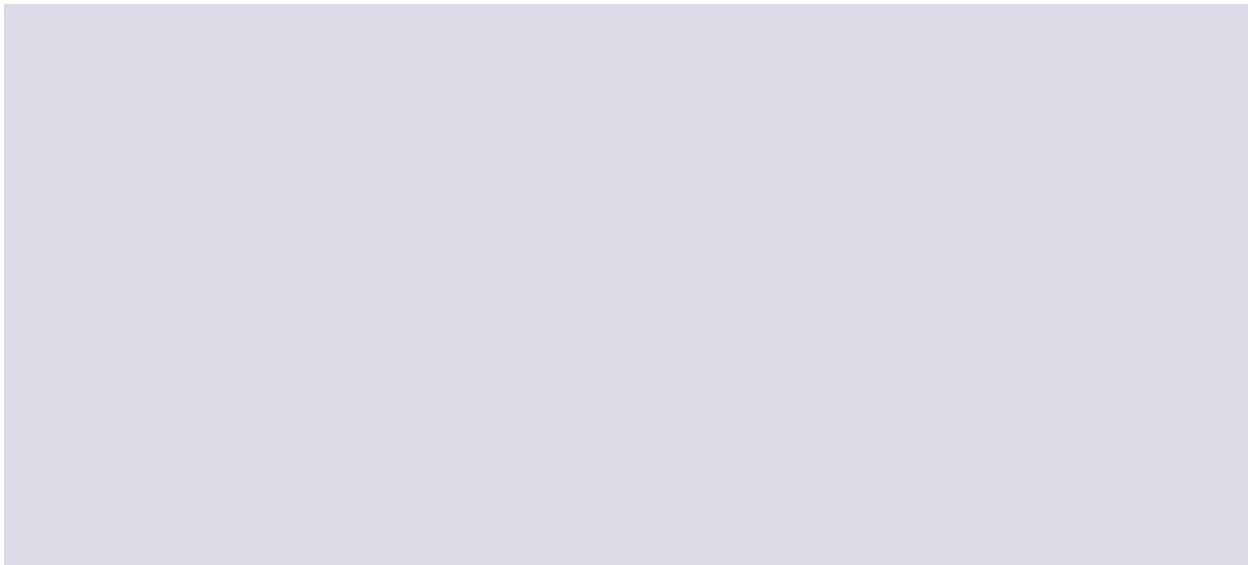
1. What have I learned? Briefly describe the outcome of your learning in terms of what you now know about the subject of your Learning Goal. Point form is fine.

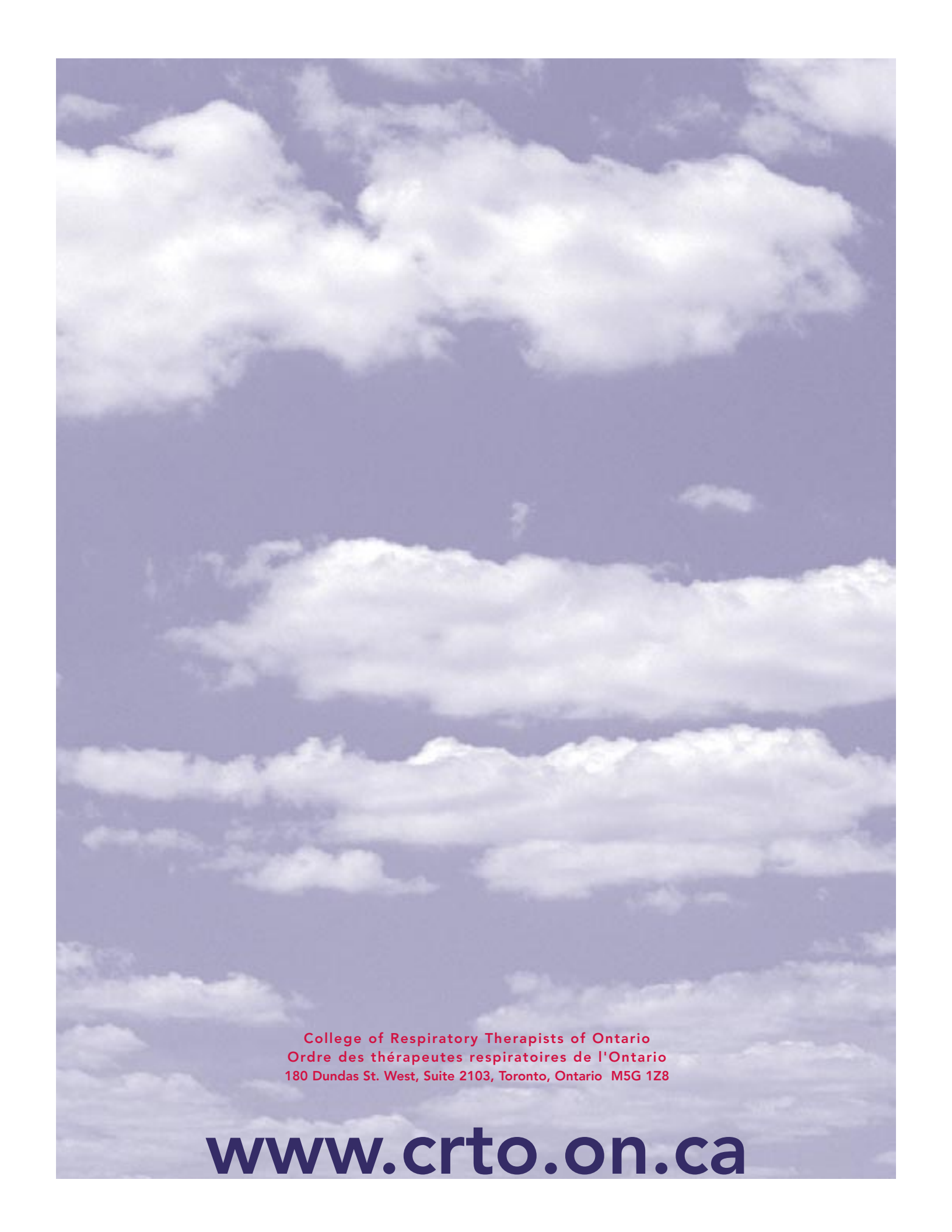
2. Did the approach that you took meet your learning needs?

3. Describe how this learning has affected your practice.



4. Has this process led me to set future Learning Goals? If yes, how so?





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