



Clinical Assessment and/or Training

Quality Assurance Policy

All physicians who wish to re-enter practice or change their scope of practice must demonstrate their competency in the areas in which they intend to practice through a clinical assessment.

Physicians with competency deficiencies identified through either Professional Conduct or Quality Assurance must attain competency in the areas in which they intend to continue practice through clinical training with or without a clinical assessment.

Scope

This policy applies to physicians who have:

- Submitted a proposal to be assessed for re-entry to practice or a change in scope of practice pursuant to the [Re-Entry to Practice and/or Change of Scope of Practice](#) Policy
- Have been ordered to undergo an assessment and/or training either through a Professional Conduct process or by the Quality Assurance Committee (QAC).

Definitions

Scope of Practice	The activities in which an individual physician is permitted to perform within a specific discipline at a particular point in time. These activities shall be based on appropriate education, training, and experience.
Change in Scope of Practice	A change in scope of practice (for the purpose of this policy) within a licensed discipline occurs when there has been an expansion of professional activities, responsibilities, procedures performed, treatments provided, and/or services provided. A change in scope of practice also occurs when a physician wishes to re-enter practice after a period of time in which their recent practice experience does not satisfy the College's currency of practice requirements for the scope in which they previously practised.

Policy

1. Applicants who meet the minimum criteria to submit an assessment proposal for the purposes of re-entry to/change of scope of practice will be referred to the College's Quality department for the proposal and assessment process.
2. All assessment and/or training proposals must be sourced by the applicant and presented to the QAC for approval. The College takes no responsibility for assessments and/or

training completed and submitted for retroactive approval that subsequently fails to receive approval.

3. Assessment and/or training proposals should:
 - i. Include a structured, detailed assessment and/or training plan;
 - ii. Follow an accredited program outline;
 - iii. Be informed by the CanMEDS principles; and
 - iv. Be facilitated by a physician who performs their duties as Most Responsible Physician (MRP) and has a faculty appointment with a post-secondary institution or equivalent acceptable to the QAC and has been identified as having the skills to complete the assessment.
4. The Physician must successfully complete the approved practice assessment and/or training program, to the satisfaction of the College, before returning to practice and/or changing their scope of practice.
5. In cases where a period of oversight has been determined appropriate, the physician will be assessed through the College's Oversight Program.
6. All fees associated with the application, assessment, supervision, oversight and any required training are the responsibility of the physician.

Document History

Approved by the Quality Assurance Committee of the CPSNL	February 27, 2025
Effective Date	February 27, 2025