Where there’s a will, there’s a way: development and piloting of the oral examination phase of a national advanced practice certification process for radiation therapists in Canada

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On behalf of the CAMRT APRT Certification Committee

September 10, 2016
Leading the Way: International Radiographer Advanced Practice Conference
The Will

Advanced role opportunity for Radiation Therapists in Canada?

Institute of Medicine, 2001
The Way

- **Clinical Specialist Radiation Therapist (CSRT) Project**
  - funded by Ontario provincial health ministry & overseen by CancerCare Ontario
  - Identified care delivery problems, explored new models of care & new scopes of practice, implemented and evaluated value to the system
  - Phases:
    - Development (2003-2006)
    - Demonstration (2007-2010)
    - Sustainability (2010-2013)
  - 28 AP positions explored across 10 cancer centres
The Way

- **CAMRT APRT Certification Committee**
  - Engagement of national partner; part of strategic plan
  - Climate in radiation therapy community suggested value in pursuing certification for this group

- **Tasks**
  - External validation of competency profile
  - Development, blueprinting, & piloting of certification process
Certification Process

Phase 1: Professional Portfolio

Phase 2: Case Submissions

Phase 3: Oral Examination
Oral Examination
Objectives & Considerations

**Content**
- Evaluation across all competency domains:
  - Clinical, Technical, Professional
  - Relevance across jurisdictions

**Format**
- Case based
- High fidelity
- Accessible – virtual/online

**Assessment**
- Reliable, valid & defensible
- Engage appropriate expertise
<table>
<thead>
<tr>
<th>Running Time</th>
<th>Duration</th>
<th>PALLIATIVE EXAM Element</th>
<th>Participants</th>
</tr>
</thead>
<tbody>
<tr>
<td>10:30-10:45</td>
<td>0:15</td>
<td>Set-Up</td>
<td>All</td>
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<tr>
<td></td>
<td></td>
<td>Login / Testing</td>
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<td>Oral Exam</td>
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<td>Portfolio Defense I</td>
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<td>Palliative Case 1 (Primary Case)</td>
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<td>12:20-12:35</td>
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<td>BREAK</td>
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<td>Palliative Case 2-4 (Secondary Cases)</td>
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<td>Portfolio Defense II</td>
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<td>1:00</td>
<td>Debrief</td>
<td>Examiners &amp; Moderator</td>
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<td></td>
<td></td>
<td>Assessment / Scoring</td>
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**3 hours + 1 hour**
• Cases
  – Real cases - ‘typical, but with some unique nuance’
  – Mapped against competency profile
  – Embedded in case narrative

C4: Assess patient’s emotional condition

Patient’s mother notes that pt’s concern regarding fertility with H&N treatment has caused her to lose significant sleep, and she is expressing signs of depression. How do you explore this with the patient?

T2: Implement clinical decisions by interpreting & integrating available imaging and clinical information

What is happening on this Day 3 CBCT, and how would you suggest the treating therapists proceed?
Resources

- Collected & anonymized resources from clinical platforms
  - Clinic notes, imaging reports, lab results
  - Videos of treatment plan dose distributions, diagnostic imaging and IGRT imaging
  - Photos of lesions, radiation reactions etc
Format

• Virtual
  – Accessible to candidates & examiners
  – Low cost
  – Easily recorded for training, appeals etc
  – Innovative!
Assessment

Connected by Videoconference

EXAMINERS

Advisor
Invigilator
Candidate

IT & OVERSIGHT

Kevin
Mark
Katherine

MODERATOR

CONTENT SUPPORT

EXAMINERS

RO
RO
RTT
MP
Nicole
Caitlin
Assessment

- **Scoring**
  - 0-3 Likert scale per competency per question
  - Weighted overall according to blueprinting of domains

**Question 4**
As you and the RO determine that it is appropriate to terminate active treatment, how might you engage with the patient and family in shared decision-making in this regard?

<table>
<thead>
<tr>
<th>COMPETENCY</th>
<th>ANSWER KEY (as a guide only)</th>
<th>N/A</th>
<th>0</th>
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<th>2</th>
<th>3</th>
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</thead>
</table>
| Competency C3 Assess and respond to the patient’s emotional condition | • Awareness of highly sensitive information being relayed and how to manage emotional response(s)  
• Possible role for Distress Screening shortly after news is relayed  
• Refer to psychological services |     |   |   |   |   |
| Competency C5 Formulate an effective plan for patient care and/or treatment | • Explore patient preferences & goals  
• Discuss code status, advanced care planning, hospice care – ensure necessary supports are in place  
• Acknowledge how treatment would do more harm than good at this point |     |   |   |   |   |
| Competency C7 Communicate results that will impact patient’s course of treatment | • Candidate describes how sensitive information will be relayed to pt  
• Importance of right time/right place/right message  
• Ensure patient has family/friends present if requested  
• Follow-up with patient (Frequency?) after news is delivered |     |   |   |   |   |

- Professional (30%)
- Clinical (35%)
- Technical (35%)
Lessons from Pilot
Lessons

• **Format**
  – Technology can be a nightmare – be prepared!

• **Content**
  – Clearer with candidates about scope

• **Candidate preparation**
  – Expectations
  – Examsmanship

• **Examiners**
  – Engage early & often

• **Assessment**
  – Bigger kettle of fish than expected!
Acknowledgments

- **CAMRT APRT Certification Committee**
  - Amanda Bolderston
  - Carol-Anne Davis
  - Elaine Dever (CAMRT)
  - Lisa Di Prospero
  - Susan Fawcett
  - Caitlin Gillan
  - Mark Given (CAMRT)
  - Nicole Harnett (Chair)
  - Donna Lewis
  - Katherine Smith (CAMRT)
  - Marcia Smoke
  - Christopher Topham (CAMRT)

- 4 CARO and 2 COMP examiners
- The 3 pilot candidates…. 