



NOVA SCOTIA COLLEGE OF
Dietitians AND
Nutritionists

Continuing Competency Program Guide
Nova Scotia College of Dietitians and Nutritionists
2024

The Nova Scotia College of Dietitians and Nutritionists (NSCDN) is the regulatory body for the profession of dietetics in Nova Scotia. In the public interest, the NSCDN regulates dietitians and nutritionists so that they can practice in a safe, ethical, and competent manner.

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Introduction to the Continuing Competency Program

The Nova Scotia College of Dietitians and Nutritionists (NSCDN) is mandated by the Dietitians Act of 2009 to establish and oversee a Continuing Competency Program (CCP) designed to serve the public interest. This program functions as a mechanism to ensure that dietitians consistently engage in continuing education that pertains to their dietetic practice. Its primary objectives are to enhance skills, uphold professional practice standards, and provide reassurance to the public regarding the competence of practitioners. Participation in the CCP is mandatory for active practice license holders.

Aligned with the vision, mission, and values of the NSCDN, the CCP serves as a regulatory instrument to aid dietitians in maintaining their competence in dietetic practice. The CCP does not determine whether a dietitian is competent; it serves as a proactive means to ensure ongoing competence, promoting safe, ethical, and proficient practice through lifelong learning.

The CCP requires that dietitians conduct self-assessments against practice standards, develop and execute personalized learning plans, and assess how learning activities impact their individual practice. This structured approach ensures that each dietitian formally reflects on their practice at least once a year. Additionally, the CCP includes a Jurisprudence Quiz, a quiz encompassing legislation, regulations, standards, or policies governing dietetic practice in Nova Scotia.

Responsibilities

NSCDN's Role

The NSCDN approves and oversees a CCP for its registrants. Each registrant is responsible for maintaining ongoing competence in dietetics practice. NSCDN evaluates the effectiveness of the program and monitors registrant participation. CCP submissions are assessed for completeness in addition to an annual audit of 15% of registrant learning plans. Additional audit details are available in the CCP Policy & Procedure Manual on NSCDN's website.

Dietitian's Role

Active practice dietitians must participate in the CCP annually. Those obtaining an active practice license after the November sitting of the CDRE are exempt from submitting learning plans. Those transitioning to active practice from the non-active roster post-October 31 must complete a learning plan, with the option of submitting a condensed learning plan for one learning goal.

Dietitians are required to complete all CCP components annually prior to license renewal. Throughout the year, dietitians can access the self-assessment and learning plan through the registrant portal. The Jurisprudence Quiz is accessible from December to February each year. All CCP requirements must be met by February 28 annually.

Continuing Competency Committee's Role

The Continuing Competency Committee provides advice to the Registrar and Deputy Registrar on the ongoing development and evaluation of the CCP. The Committee also completes the annual audit process of learning plans that have been deemed unsuccessful by volunteer auditors by completing a review and final audit of each plan.

Continuing Competency Auditors' Role

Auditors are dietitians who volunteer to audit. For consistency and correctness, auditors require training on how to complete the audit. To prevent discrepancies/inconsistencies in the auditing process, two trained auditors review each submission.

CCP Annual Requirements

Part 1: Jurisprudence Quiz

The purpose of this quiz is to assist dietitians in staying up to date with regulatory, provincial, and federal requirements concerning dietetic practice. Emphasizing the legal proverb, "ignorance of the law excuses no one," it highlights that individuals remain accountable for legal compliance regardless of awareness. It's important to note that the Jurisprudence Quiz provides only a snapshot of legislation, regulations, and standards that dietitians are obligated to follow. The quiz contains 12 questions. Each dietitian has unlimited attempts to achieve a passing score of 80%. It can be accessed through the registrant portal during the renewal period.

Part 2: Self-Assessment

The self-assessment is based on the Standards of Practice and is designed to assist dietitians in identifying learning needs and documenting opportunities to develop and improve various aspects of their practice. This assessment is the first step in developing an annual learning plan. The self-assessment can be accessed at any time through the registrant portal. The self-assessment should be completed following registration or license renewal.

Part 3: Learning Plans

Learning plan captures learning goals and learning activities a dietitian has engaged in to achieve their annual goals. A dietitian is required to complete two distinct learning plans each year. Learning plans should be initiated following the completion of the self-assessment and completed throughout the licensing year. The learning plan requires a dietitian to identify:

- Chosen standard and indicator from the NSCDN Standards of Practice
- Annual learning goals
- Anticipated benefit to practice a completed goal will have
- Activity record detailing the date, name, and source of learning activities
- Reflection on how new learning impacts dietetic practice.

Self-Assessment

Self-assessment plays a vital role in identifying learning needs for the upcoming licensing year. The self-assessment is a mandatory component of the CCP that must be completed at the beginning of the competency cycle, as it highlights areas for knowledge and competency development that aligns with the Standards of Practice. The self-assessment is in Appendix A.

For each indicator within the self-assessment, dietitians will be asked to reflect honestly and identify if it is either:

- a) an area for development and learning, or
- b) not identified for learning at this time.

"An area for development and learning" signifies an area where dietitians recognize the need to enhance understanding and knowledge in dietetic practice, benefiting both practice and clients. Conversely, "Not identified for learning at this time" indicates a comprehensive understanding of these standards within their specific practice areas or that the indicator is not applicable to their practice.

Upon completion, dietitians will review their assessment results and select at least two areas to establish learning goals.

Self-Assessment Notes:

1. *The term "client" refers to an individual, family, substitute decision-maker, team members, group, population, agency, government, employer, employee, business, organization, or community, who is the direct or indirect recipient of the dietitian's skill and knowledge.*
2. *Some indicators within the Standards of Practice have been removed as they are not applicable to setting learning goals. Refer to Appendix B for a list of indicators that have been removed from the CCP Self-Assessment.*

Creating Learning Plans

Learning plans serve as a structured approach to organizing learning goals, identifying the benefits of practice, documenting completed learning activities, and reflecting on how new knowledge integrates into dietetic practice. Each learning plan prompts the user to specify:

- Standard and indicator chosen
- Learning goal
- Anticipated benefit to practice
- Learning activities (and dates completed)
- Evaluation of learning in the form of a reflection on learning.

Once indicators are designated for development and learning, dietitians must specify their learning goals and practice benefits. During renewal, the standard/indicator, learning goal, and benefit to practice are the only fields required for next year's learning plan.

Following the conclusion of the renewal period (February 28), dietitians can access their learning plans for the new licensing year through the "My Learning" section in the registrant portal. Should a dietitian need to modify their learning objectives due to employment changes or shifts in practice focus, they must align the chosen standard and indicator with their self-assessment. After updating the standard and indicator, all other sections, including the learning goal, practice benefits, and learning activity record, must be adjusted accordingly. This process may involve removing activity records as needed.

If the standard and indicator are not included in the self-assessment, dietitians can integrate new indicators into their existing self-assessment. Refer to the self-assessment section for further guidance.

Learning Goals

Following completion of the self-assessment, dietitians will have a list of indicators from the Standards of Practice that they have identified as appropriate for learning objectives in the coming year. Dietitians will then choose two indicators to base their learning goals on.

Key considerations:

- Goals and learning activities must be completed within the registration year (March 1-February 28).
- Goals should center around a dietitian's scope of dietetic practice, aiming to enhance knowledge and skills that have a positive impact on clients and patients.
- Goals must be specific, clear, and measurable.
- Goals should be concisely written. There is an intentional 300-character limit for each Learning Plan category.

Learning goals should not focus on fulfilling personal or job-related tasks, such as participating in meetings, mentoring interns, or securing employment. While some tasks like participating in meetings can lead to meaningful learning, this learning is captured through the College’s active practice requirement.

Examples of acceptable and unacceptable CCP learning goals are provided in Appendix C.

Benefit to Practice

Dietitians will be required to select a benefit to practice for each goal. The benefit to practice is the learning outcome that the dietitian is anticipating from a learning goal. A benefit to practice is selected from the following options:

- Developed program/process/product
- Improved work environment
- Enhanced accountability
- Increased confidence
- Enhanced critical thinking/decision making
- Increased knowledge/skill/competence
- Improved communication skills

Learning Activities

After setting learning goals, dietitians should plan and organize learning activities to achieve each goal. Each learning goal must have sufficient associated activities to demonstrate a full year of learning. Activities must directly relate to the learning goal and dietetic practice. The type of learning activity can be selected from a drop-down menu. The CCP recognizes the following learning activity categories:

- Case Studies
- Conferences
- Workshops
- Webinars
- Courses
- Lectures
- Journal articles
- Books
- Reputable podcasts
- Reputable videos
- Reputable websites
- Grey Literature
- Conversations with subject matter experts

For each learning activity, dietitians will be required to document the following details in the activity record:

- Date Completed
- Title – title of the activity (enter something that easily identifies the activity)
- Speaker/Host – individual/organization that authored or hosted an activity

- Activity – select from the drop-down list

Examples of activity records are provided in Appendix D.

Reflection on Learning

Learning reflections are required at renewal to complete the CCP cycle for the past year. The reflection should include:

- Explanation of how learning was applied in practice, including insights gained from completed activities and how practice or competence was enhanced due to new learning.
- Clear and concise writing, avoiding abbreviations or unfamiliar terminology.
- A 1000-character limit on all reflections.

It's crucial to provide sufficient information for an auditor to easily comprehend the acquired knowledge and how competence (knowledge, skill, attitude/judgment) has improved.

The reflection portion of the learning plan is only available during the renewal period. If a dietitian is interested in composing their learning plan reflection prior to the opening of the renewal period, they are encouraged to compose reflections for each achieved learning goal using an external program, such as Microsoft Word.

Examples of learning plan reflections are provided in Appendix D.

Submitting Learning Plans

Learning plans must be submitted each year by February 28.

Dietitians are required to submit learning plans and reflections for the preceding licensing year, along with indicating their proposed CCP learning goals for the upcoming year. Proposed learning goals can be modified at any time during the year. This can be completed within the "My Learning" section of the registrant portal.

Each year, dietitians must submit a minimum of two learning goals. Online CCP learning goal submissions consist of the following mandatory fields for each goal:

- Standard (as determined by CCP Self-Assessment)
- Indicator (as determined by CCP Self-Assessment)
- Learning Goal (300-character limit)
- Benefit to Practice
- Activity Record (log of learning activities)
- Reflection on Learning (1000-character limit)

Only CCP submissions that include all requirements will be processed at renewal. Incomplete CCP submissions will result in a late renewal package.

Audits

An audit is an internal procedure aimed at verifying the completion of annual learning plans and ensuring that reflections align appropriately with their established learning goals. Each March, fifteen percent of all dietitians are selected for audit. As dietitians have fulfilled their learning plan requirements during licensing renewal, no further information is required.

Volunteer auditors review submissions selected for audit, focusing on the following:

- Clarity of learning goals, is the subject matter the dietitian wishes to learn about clearly specified and linked to the chosen indicator?
- Reasonableness of activity record, are activities relevant to the identified learning goal?
- Sufficiency of reflection on learning, is there evidence demonstrating the application of learning in practice or the enhancement of practice?
- Are there sufficient learning activities to demonstrate a full year of learning?
- Did the reflection clearly articulate learning outcomes such as how new learning was incorporated into practice or how dietetic practice was enhanced due to new learning?

Based on these criteria, auditors determine an outcome for each dietitian's CCP. Dietitians who were audited will receive feedback regarding their CCP audit results. Results will include:

- Acceptable: meets CCP requirements
- Unacceptable: does not meet the CCP requirements

Information on the CCP audit process is available in the [CCP policies](#).

Non-Compliance with the Continuing Competence Program

In instances where learning plans fail to meet established evaluation criteria, resulting in an unsuccessful submission, the College will offer guidance to the dietitian regarding necessary actions. Failure to adhere to renewal requirements may lead to license conditions or suspension.

Dietitians receiving unsuccessful audit results are encouraged to meet with the Deputy Registrar. Dietitians who submitted an unsuccessful CCP have two options:

1. Resubmit the learning plan by July 30.
2. Have their next CCP submission audited. The subsequent audit requires a document audit, submitting verification documentation for each learning activity.

Document Audit

Verification of activities might include but is not limited to *dated* combinations of the following:

- Course certificate/receipts and notes
- Notes from rounds/education sessions
- Listing of references/resources used and summary of findings
- Contact information for colleagues consulted and description of case or issue discussed
- Course outline or program and notes
- Copies of materials/presentations developed
- Meeting date(s), participant list, and topic summary of journal club/study groups
- Summary of ideas generated with colleagues on an identified practice issue or problem
- Written summary of literature review
- Description of a case study, research, or other finding that impacted your practice

The document provided as activity verification must demonstrate that the dietitian completed the activity as recorded in the learning plan. Please note that a certificate or course outline alone is insufficient to verify activity completion. Supplying dated notes, for example, is an acceptable way of demonstrating both attendance and learning from the activity.

Continuing Competency Program Resources

- [Continuing Competency Program Self-Assessment](#)
- [Continuing Competency Program Audit Assessment Rubric](#)
- [Integrated Competencies for Dietetic Education and Practice \(2020\)](#)
- [Code of Ethics \(2024\)](#)
- [Standards of Practice \(2020\)](#)
- [Nova Scotia Health Equity Framework](#)
- [NSCDN Policies and Position Statements](#)
- [Jurisprudence Handbook](#)
- [Continuing Competency Program Policies & Procedures](#)
- [Video for New Registrants](#)
- [Dietitians Act \(2009\)](#)
- [Dietitians Regulations \(2023\)](#)

Appendix A: CCP Self-Assessment

The indicators in Table 1 are included in the College's CCP Self-Assessment, to be completed online each year.

Self-assessment plays a vital role in identifying learning needs for the upcoming licensing year. The self-assessment is a mandatory component of the CCP that must be completed at the beginning of the competency cycle, as it highlights areas for knowledge and competency development that aligns with the Standards of Practice.

The Standards of Practice are based on the assumptions that they:

- Support NSCDN's primary professional obligation to protect and serve the public interest according to legislative requirements.
- Apply to the diverse professional roles of dietitians including but not limited to: assessment of nutritional requirements of individuals/groups; management of nutrition goals for population health, disease management and prevention; management of food nutrition services/programs; education of clients and others; development of nutrition related tools/communications; employment in industry and business; and contribution to research. The standards are applicable to all dietitians regardless of their roles, responsibilities, and practice context.
- Represent the minimum practice performance of dietitians in delivering safe, competent, ethical services.
- Outline the mandatory performance expectations which must be adhered to by dietitians.
- Are one element of a continuum of documents such as legislation, codes of ethics, practice guidelines, and competency profiles that shape and guide the practice of the profession.

Self-Assessment Notes:

- 3. The term "client" refers to an individual, family, substitute decision-maker, team members, group, population, agency, government, employer, employee, business, organization, or community, who is the direct or indirect recipient of the dietitian's skill and knowledge.*
- 4. Some indicators within the Standards of Practice have been removed as they are not applicable to setting learning goals. Refer to Appendix B for a list of indicators that have been removed from the CCP Self-Assessment.*

Table 1: CCP Self-Assessment

Standard	Indicator
Standard 1: Advertising	a. Ensure that advertising is an honest and fair representation of professional services and/or products offered.
	b. Adhere to NSCDN’s Code of Ethics for Registered Dietitians and refrain from using advertising that directly or indirectly: <ul style="list-style-type: none"> i. creates unjustified expectations about the results; ii. compares the ability, quality, and/or cost of professional services with that of other dietitians; iii. takes advantage either physically, emotionally or financially of clients; iv. endorses, promotes or recommends exclusive use of a product/brand used/sold as a component of professional services, unless supported by evidence; and, v. uses client testimonials to endorse professional services and/or products.
Standard 2: Assessment and Interventions	a. Obtain client consent for professional services.
	b. Obtain, review, and interpret relevant assessment data
	e. Monitor, evaluate, and document the impact of interventions in achieving identified outcomes, proposing alternative interventions if goals have not been achieved.
Standard 3: Boundaries	a. Be sensitive to their position of relative power or influence in professional relationships and not use this status to take physical, emotional, sexual, financial, or other types of advantage of clients and team members.
	c. Respect, establish, and manage effectively, the boundaries that separate their personal and professional relationships/roles in all contexts (e.g., face-to-face, virtual dietetic practice, social media).
Standard 4: Client-Centred Services	a. Acknowledge and respect the rights, dignity, and uniqueness of each client (e.g., ethnic/cultural background, religion, age, gender, social status, marital status, sexual orientation, political beliefs, physical/mental ability, corporate mission, and values).
	b. Collaborate with clients to identify and develop goals, plans, and interventions to meet their unique needs.

	<p>c. Acknowledge and respect clients' rights to autonomy and decision making over their own health.</p> <p>d. Advocate the client's behalf when required.</p>
Standard 5: Collaborative Practice	<p>a. Contribute professional knowledge to discussions and interactions with clients and team members.</p> <p>c. Respect clients' and team members' perspectives and responsibilities, while acknowledging overlapping roles and scopes of practice.</p> <p>e. Effectively manage conflict with clients and team members.</p>
Standard 6: Communication	<p>a. Be clear and respectful in all verbal, nonverbal, and written communication.</p> <p>b. Maintain clients' privacy and confidentiality in all forms of communication.</p> <p>c. Use strategies to promote effective communication (e.g., active listening, empathy).</p> <p>d. Adapt communication to the needs of clients and minimize barriers by incorporating relevant supports as available (e.g., interpreters, visual aids, technology, appropriate language, culturally appropriate resources).</p> <p>e. Use strategies to facilitate clients' comprehension and learning (e.g., opportunity for questions, teach back, appropriate literacy levels).</p> <p>f. Communicate with professional integrity and maintain appropriate boundaries in all communication formats at all times.</p>
Standard 7: Competence	<p>b. Evaluate their own practice and participate in continuing professional development to identify and address learning needs.</p> <p>d. Maintain competence in the present area(s) of practice, incorporating evidence into professional services.</p> <p>e. Acquire the knowledge and skills to practice competently in emerging practice areas as required.</p>
Standard 8: Conflict of Interest	<p>a. Recognize any situations in which a conflict of interest could have an impact on their professional judgment.</p> <p>d. Document any conflict of interest, the efforts to manage it, and the outcome(s).</p>
Standard 9: Consent	<p>a. Provide clients with complete and objective information regarding the risks, benefits, and options for treatment and/or professional services.</p>

	<p>b. Obtain client consent prior to the provision of services and document as required.</p> <p>d. Respect clients' rights to: make choices, consult, and request additional information; refuse proposed interventions; and withdraw previously provided consent at any time.</p>
Standard 10: Evidence-Informed Practice	<p>a. Access and critically appraise current and applicable evidence.</p> <p>b. Incorporate current evidence, using critical thinking and professional judgment, when providing professional services.</p> <p>d. Maintain comprehensive records regarding the delivery of professional services and/or sale of products.</p>
Standard 12: Privacy/Confidentiality	<p>a. Ensure client consent is obtained prior to collecting or disclosing personal, organizational, and/or business information, unless duty to report obligations is required.</p> <p>b. Access and collect only the client information that is essential to carry out the delivery of safe, competent, ethical services.</p>
Standard 13: Professional Practice Obligations	<p>a. Accept as their primary professional obligation, to protect and serve the public interest according to the NSCDN Code of Ethics.</p>
Standard 14: Record Keeping	<p>d. Maintain complete and accurate financial records for all relevant professional services.</p>
Standard 15: Safety and Risk Management	<p>a. Comply with occupational health and safety legislation, best practices in infection prevention and control, and organization/employer policies and procedures.</p> <p>c. Contribute to and comply with risk management activities/requirements to promote a safe environment (e.g., working alone, environmental hazards, threats to personal safety).</p> <p>e. Comply with food safety standards in the delivery of professional services.</p>

Appendix B: Standard of Practice Indicators Removed from Self-Assessment

These indicators are not included in NSCDN’s CCP Self-Assessment as they are not applicable to setting learning goals to enhance competent practice.

Table 2: Removed Standards of Practice Indicators for CCP Self-Assessment

Standard 2: Assessment and Interventions	c. Collaborate and communicate with client to determine goals/plans and interventions.
	d. Implement, coordinate, and document the provision of client-centred interventions.
	f. Continue to offer professional services until either the client is transferred, discharged, self-managing, declines care, another provider has assumed responsibility, or the dietitian determines further services are not required.
Standard 3: Boundaries	b. Establish and maintain appropriate professional boundaries in relationships with clients and team members.
	d. Obtain consent prior to touching a client.
	e. Refrain from entering professional relationships when current or previous personal, financial, employment, and/or legal affiliations would compromise professional services or integrity.
	f. Ensure that boundary crossings that cannot be avoided (e.g., treatment of family/friend in specialized or rural practice) are reported to the appropriate authority (e.g., manager, team leader) and strategies to manage are documented (e.g., in the client file, record).
	g. End professional relationships with clients, transfer care when professional boundaries cannot be maintained, and document, as required, how the situation was managed.
Standard 5: Collaborative Practice	b. Clarify and explain their professional roles and responsibilities in discussions with clients and team members.
	d. Consult with and/or refer as required, when the client’s needs may be more appropriately met by another dietitian or team member.
	f. Communicate clearly and respectfully with clients and team members, at all times to facilitate collaboration.
Standard 6: Communication	g. Document professional communications accurately and in a timely manner as required.

Standard 7: Competence	a. Provide professional services within the limits of their qualifications and personal level of competence.
	c. Identify practice situations beyond their personal level of competence and consult, refer, and/or obtain further knowledge and skills to provide professional services.
	f. Comply with the NSCDN continuing competence program, adhering to all applicable legislative and regulatory requirements.
	g. Voluntarily withdraw from practice if they self-identify that they are no longer able to provide safe, competent, ethical services (e.g., illness, substance abuse).
Standard 8: Conflict of Interest	b. Avoid any conflict of interest in which professional services could be compromised.
	c. When a conflict of interest cannot be avoided, disclose to the appropriate authority (e.g., manager, team leader), manage the situation, and/or discontinue professional services.
	e. Provide options for the provision of services and/or products when a conflict of interest exists.
	f. Refrain from accepting personal incentives from service and/or product sponsors when the dietitian stands to profit personally and/or financially.
	g. Refrain from offering incentives to clients that places the dietitian's personal gain above their professional responsibilities.
Standard 9: Consent	c. Inform clients in a timely manner of proposed changes to the agreed-upon intervention plan and/or provide new information relevant to consent.
	e. Obtain approval from the appropriate research ethics board and consent from clients participating in research studies.
Standard 10: Evidence- Informed Practice	c. Initiate and/or participate in evaluation and health service quality improvement activities (e.g., client questionnaires, chart audits, population health data review) to assess new and/or ongoing professional services, products, and programs.
	d. Use the feedback obtained from continuous quality improvement activities to improve professional services.
	e. Contribute to new knowledge, by participating in data collection and practice-based research as feasible, conforming to applicable research ethics guidelines and processes.

Standard 11: Fees and Billing	a. Be responsible and accountable for all billing under their registration number.
	b. Ensure that fees charged for professional services and/or products are fair, reasonable, and justifiable.
	c. Disclose fee schedules for all applicable professional services and/or products including accepted methods of payment, potential additional fees (e.g., cancellation fees, photocopying, mailing), and the process for fee dispute resolution, prior to provision of professional services.
Standard 12: Privacy/Confidentiality	c. Use physical, technical, and administrative safeguards (e.g., locked filing cabinets, passwords) to protect paper-based, audio, video, electronic or other client information.
	d. Avoid conversations about clients and/or professional services provided that can be overheard and/or breach privacy and confidentiality.
Standard 13: Professional Practice Obligations	b. Hold a valid practice permit/license and practice in compliance with applicable legislative and regulatory requirements.
	c. Maintain a level of personal and professional conduct that upholds the integrity and dignity of the profession and sustains public confidence.
	d. Comply with duty to report requirements in accordance with applicable legislation, regulations, and/or organization/employer policies.
	e. Report abuse, incapacity, incompetence, or unprofessional conduct to the appropriate authority in accordance with applicable legislation, regulations, and/or organization/employer policies.
	f. Take responsibility and be accountable to practice within their personal level of competence.
	g. Provide supervision, mentoring, and direction to those under their supervision (e.g., students, dietetic interns/nutrition practicum students, staff, volunteers).
	h. Accurately represent their professional qualifications, experience, knowledge, and skills.
	i. Voluntarily withdraw themselves from professional practice when circumstances exist that impair their professional judgment, impact competence, or may cause harm to clients.
	j. Ensure they have the appropriate practice permit/license to deliver services by virtual dietetic practice.

	k. Use provincially protected titles.
Standard 14: Record Keeping	a. Document, sign, and date complete, accurate, timely records related to professional services.
	b. Maintain, retain, share, transport, store, and dispose of all paper and/or electronic records in compliance with applicable legislative, regulatory, and organizational/employer requirements.
	c. Secure all personal client information through appropriate use of physical, technical, and electronic safeguards to protect the privacy and confidentiality of client information.
	e. Maintain equipment service records (e.g., preventative maintenance logs) according to applicable legislative, organizational/employer, and manufacturer recommendations.
	f. Plan for and ensure the transfer or disposition of records when leaving a position or ceasing to practice.
Standard 15: Safety and Risk Management	b. Maintain certification(s) related to infection prevention and control, and occupational health/workplace safety, as applicable.
	d. Comply with reporting and follow up procedures related to adverse events, emergency situations, and/or incidents involving workplace safety.
	f. Participate, as required, in health service quality improvement activities to promote and support safe, competent, ethical professional services (e.g., questionnaires, chart audits).

Appendix C - Learning Goal Examples

Table 3: Example CCP Learning Goals Related to Standards of Practice Indicators

Standard	Indicator	Example goal
Standard 1: Advertising	a. Ensure that advertising is an honest and fair representation of professional services and/or products offered.	<ul style="list-style-type: none"> I will increase my understanding of professional ethics, including honesty, as it relates to advertising of professional services.
	b. Adhere to NSCDN’s Code of Ethics for Registered Dietitians and refrain from using advertising that directly or indirectly: <ol style="list-style-type: none"> creates unjustified expectations about the results; compares the ability, quality, and/or cost of professional services with that of other dietitians; takes advantage either physically, emotionally or financially of clients; endorses, promotes or recommends exclusive use of a product/brand used/sold as a component of professional services, unless supported by evidence; and, uses client testimonials to endorse professional services and/or products. 	<ul style="list-style-type: none"> I will increase my understanding of ethical advertising.
Standard 2: Assessment and Interventions	a. Obtain client consent for professional services.	<ul style="list-style-type: none"> I will increase my knowledge and competence regarding consent and how to professionally obtain and document consent.
	b. Obtain, review, and interpret relevant assessment data	<ul style="list-style-type: none"> I will update my knowledge related to interpreting assessment data as it relates to my practice in renal dietetics.

	e. Monitor, evaluate, and document the impact of interventions in achieving identified outcomes, proposing alternative interventions if goals have not been achieved.	<ul style="list-style-type: none"> I will develop skills in evaluating the outcome of interventions implemented in my practice as a long term care dietitian.
Standard 3: Boundaries	a. Be sensitive to their position of relative power or influence in professional relationships and not use this status to take physical, emotional, sexual, financial, or other types of advantage of clients and team members.	<ul style="list-style-type: none"> I will increase my understanding of power dynamics between regulated health professionals and clients.
	c. Respect, establish, and manage effectively, the boundaries that separate their personal and professional relationships/roles in all contexts (e.g., face-to-face, virtual dietetic practice, social media).	<ul style="list-style-type: none"> I will increase my knowledge of managing professional boundaries. I will develop an understanding of dual relationships.
Standard 4: Client-Centred Services	a. Acknowledge and respect the rights, dignity, and uniqueness of each client (e.g., ethnic/cultural background, religion, age, gender, social status, marital status, sexual orientation, political beliefs, physical/mental ability, corporate mission, and values).	<ul style="list-style-type: none"> I will increase my competency in inclusive language. I will learn about Indigenous-specific racism in healthcare. This year, I will increase my knowledge of Ramadan to better support Muslim clients. I will understand the role of colonialism as a social determinant of health. I will enhance my knowledge of intellectual disability as it relates to nutrition status. I will understand health equity in the context of health system policies and practices.
	b. Collaborate with clients to identify and develop goals, plans, and interventions to meet their unique needs.	<ul style="list-style-type: none"> I will develop an understanding of participatory action research. I will enhance my knowledge of the collaborative care model.

	c. Acknowledge and respect clients' rights to autonomy and decision making over their own health.	<ul style="list-style-type: none"> I will develop a knowledgebase related to the importance of personal autonomy in health care decisions.
	d. Advocate the client's behalf when required.	<ul style="list-style-type: none"> I will enhance my understanding of advocacy strategies related to food security.
Standard 5: Collaborative Practice	a. Contribute professional knowledge to discussions and interactions with clients and team members.	<ul style="list-style-type: none"> I will increase my skills in knowledge translation.
	c. Respect clients' and team members' perspectives and responsibilities, while acknowledging overlapping roles and scopes of practice.	<ul style="list-style-type: none"> I will increase my understanding of best practices in interprofessional collaboration.
	e. Effectively manage conflict with clients and team members.	<ul style="list-style-type: none"> I will acquire knowledge of conflict management strategies in the workplace.
Standard 6: Communication	a. Be clear and respectful in all verbal, nonverbal, and written communication.	<ul style="list-style-type: none"> I will understand effective professional communication approaches.
	b. Maintain clients' privacy and confidentiality in all forms of communication.	<ul style="list-style-type: none"> I will learn more about personal health information and related legislation.
	c. Use strategies to promote effective communication (e.g., active listening, empathy).	<ul style="list-style-type: none"> I will enhance my knowledge of interpersonal skills as they apply in professional communication. I will develop an understanding of active listening techniques.
	d. Adapt communication to the needs of clients and minimize barriers by incorporating relevant supports as available (e.g., interpreters, visual aids, technology, appropriate language, culturally appropriate resources).	<ul style="list-style-type: none"> I will learn about the principles of inclusive communication.

	e. Use strategies to facilitate clients' comprehension and learning (e.g., opportunity for questions, teach back, appropriate literacy levels).	<ul style="list-style-type: none"> I will enhance my understanding of adult learning theory and principles.
	f. Communicate with professional integrity and maintain appropriate boundaries in all communication formats at all times.	<ul style="list-style-type: none"> I will develop an understanding of professional integrity in communication.
Standard 7: Competence	b. Evaluate their own practice and participate in continuing professional development to identify and address learning needs.	<ul style="list-style-type: none"> I will increase my understanding of the role of self-assessment in facilitating self-reflection and strengthening professional competencies.
	d. Maintain competence in the present area(s) of practice, incorporating evidence into professional services.	<ul style="list-style-type: none"> I will increase my understanding of current evidence related to home healthcare. I will enhance my knowledge of best practices in menu planning. will increase my knowledge of how to I develop food- and nutrition-related population health plans. I will increase my understanding of management principles. I will increase my knowledge of governance as it relates to professional regulation. I will update my knowledge of counselling for behaviour change.
	e. Acquire the knowledge and skills to practice competently in emerging practice areas as required.	<ul style="list-style-type: none"> I will acquire knowledge and skills related to sustainable food systems. I will increase my understanding of nutrition prescription.
Standard 8: Conflict of Interest	a. Recognize any situations in which a conflict of interest could have an impact on their professional judgment.	<ul style="list-style-type: none"> I will increase my knowledgebase around conflict of interest as it relates to my role as a committee member.

	d. Document any conflict of interest, the efforts to manage it, and the outcome(s).	<ul style="list-style-type: none"> I will understand mitigation strategies related to conflict of interest.
Standard 9: Consent	a. Provide clients with complete and objective information regarding the risks, benefits, and options for treatment and/or professional services.	<ul style="list-style-type: none"> I will enhance my competence in communicating risk using absolute and relative risk.
	b. Obtain client consent prior to the provision of services and document as required.	<ul style="list-style-type: none"> I will develop an understanding of the difference between implied and expressed consent.
	d. Respect clients' rights to: make choices, consult, and request additional information; refuse proposed interventions; and withdraw previously provided consent at any time.	<ul style="list-style-type: none"> I will increase my knowledge of patient rights in Nova Scotia. I will develop an increased understanding of non-verbal communication as it relates to indications of a desire to discontinue.
Standard 10: Evidence-Informed Practice	a. Access and critically appraise current and applicable evidence.	<ul style="list-style-type: none"> I will update my knowledge of artificial sweeteners by reviewing current evidence. I will review and understand the evidence around a dining-on-call model of food delivery. I will enhance my competence in critical appraisal of a research paper. This year, I will increase my knowledge of the role of collagen, with a focus on evidence around dietary supplementation of collagen.
	b. Incorporate current evidence, using critical thinking and professional judgment, when providing professional services.	<ul style="list-style-type: none"> I will enhance my understanding of critical thinking as it relates to policy development. I will increase my understanding of professional judgement as it relates to my dietetic practice.

	d. Maintain comprehensive records regarding the delivery of professional services and/or sale of products.	<ul style="list-style-type: none"> I will increase my understanding of business requirements related to fees, billing, and CRA requirements for my private practice.
Standard 12: Privacy/Confidentiality	a. Ensure client consent is obtained prior to collecting or disclosing personal, organizational, and/or business information, unless duty to report obligations is required.	<ul style="list-style-type: none"> I will learn more about personal health information and related legislation.
	b. Access and collect only the client information that is essential to carry out the delivery of safe, competent, ethical services.	<ul style="list-style-type: none"> I will increase my understanding of the Nova Scotia Personal Health Information Act as it relates to the collection of client information.
Standard 13: Professional Practice Obligations	a. Accept as their primary professional obligation, to protect and serve the public interest according to the NSCDN Code of Ethics.	<ul style="list-style-type: none"> I will update my knowledge of regulatory responsibilities as a dietitian in Nova Scotia. I will increase my competency to act as a preceptor to dietetic interns.
	d. Maintain complete and accurate financial records for all relevant professional services.	<ul style="list-style-type: none"> I will increase my understanding of provincial and federal legislation requirements related to financial record keeping.
Standard 15: Safety and Risk Management	a. Comply with occupational health and safety legislation, best practices in infection prevention and control, and organization/employer policies and procedures.	<ul style="list-style-type: none"> I will increase my understand of infection control as it relates to my practice in a long-term care facility.
	c. Contribute to and comply with risk management activities/requirements to promote a safe environment (e.g., working alone, environmental hazards, threats to personal safety).	<ul style="list-style-type: none"> I will learn about non-violent crisis intervention. I will increase my understanding of risk management strategies as a private practice dietitian.
	e. Comply with food safety standards in the delivery of professional services.	<ul style="list-style-type: none"> I will update my understanding of food safety standards.

Table 4: Unacceptable CCP Learning Goals

Unacceptable CCP Goal	Reason	Revised Learning Goal
This year, I am going to mentor a Dietetic Intern.	The goal is focused on completing a task.	I will increase my knowledge and skills in preceptorship and mentoring by September 2024.
I am going to create a new dining standard in a continuing care setting.	The goal is focused on completing a task.	I will learn about best practices in dining standards for a continuing care setting, including national standards and recent research in this area.
To keep up with changes in practice, I want to learn about fad diets.	The goal is broad. Annual learning goals should be more specific	I will enhance my knowledge about the ketogenic diet between March 2024 and February 2025.
In 2024, I will pass the CDE exam.	The goal is focused on completing a task.	Between July and November 2024, I will update my knowledge of the current diabetes clinical practice guidelines and diabetes education standards in Canada.
I will obtain CSEP certification to become a personal trainer. This certification will help me counsel my clients better on their physical activity goals.	The goal is not within the dietetic scope of practice	Identify a learning goal related to dietetic practice.

Appendix D – Activity Record and Reflection Example

Table 5: Activity Record Example 1

Learning goal	By the end of January, I want to learn more about personal health information and related legislation.			
Standard	12: Privacy/Confidentiality			
Indicator	a. Ensure client consent is obtained prior to collecting or disclosing personal, organizational, and/or business information, unless duty to report obligations is required.			
Benefit to practice	Increased knowledge/skill / competence			
Activity Record	Date Completed	Title	Activity Category	Source
	9/15/2024	Personal Health Information Act (PHIA)	Reputable Website	NS Government website
	10/4/2024	PHIA Toolkit	Reputable Website	NS Government Website
	10/7/2024	Fact sheet: PHIA and PIPEDA	Reputable Website	NS Government Website
	11/2/2024	Personal Information Protection Electronic Documents Act (PIPEDA)	Reputable Website	Federal Government Website
Reflection on Learning	I learned that privacy legislation refers to the laws that enforce the collection, use, and disclosure of one’s personal information. I learned that NS governs how regulated healthcare professionals and organizations collect, use, disclose, and maintain personal health information. I also became more familiar with PIPEDA, the federal privacy legislation that establishes the rules to govern the collection, use, and disclosure of personal information. PIPEDA applies to any commercial activity, including the delivery of health services considered to be commercial. I used this new knowledge to develop operational policies for my part-time private practice. I also incorporated my learning into developing a guide to health information and shared it with dietetic practicum students in my clinical practice. These students provided me with feedback that they understood privacy legislation better after I gave a presentation on the tool. I also feel more confident speaking about privacy issues with colleagues.			

Table 6: Activity Record Example 2

Learning goal	This year, I want to learn about collaboration and negotiation principles as they relate to interprofessional healthcare teams.			
Standard	5: Collaborative Practice			
Indicator	F: Communicate clearly and respectfully with clients and team members, at all times to facilitate collaboration.			
Benefit to practice	Enhanced critical thinking/decision making			
Activity Record	Date Completed	Title	Activity Category	Source
	8/7/2024	BOOST! Building Optimal Outcomes from Successful Teamwork	Workshop	Workshop by Dean Lising and Lynne Sinclair – University of Toronto
	9/14/2024	Read "Teamwork, Leadership, and Communication: Collaboration Basics for Health Professionals"	Book	Book by Deborah Lake, Krista Baerg, and Teresa Paslawski
	9/14/2024	Read: Solid Negotiation Skills	Reputable Website	Article by Cleverley Associates
	10/10/2024	Working on working together. A systematic review of how healthcare professionals contribute to interprofessional collaboration	Journal Article	Journal Article by Evert Schota, Lars Tummessa, and Mirko Noordegraa
Reflection on Learning	I learned that collaboration for the best patient outcomes requires understanding all team members' roles, trust, and shared leadership and trust within teams. Negotiation and conflict resolution skills work best when team members know one another and are vested in patient outcomes. I also gained experience role-playing with two of my team members during the BOOST workshop, which enhanced my confidence in my negotiating skills. I am more competent in this area and within my team, as I am more confident when having difficult discussions. In my performance review, my manager acknowledged my leadership in this area and how it led to an enhanced collaboration to meet patient care needs.			

Appendix E – Continuing Competency Program Audit Assessment Rubric

Note: Before beginning, review the learning plans to ensure that each has a distinct goal. If goals are not distinct, rate one learning plan and score the other 0.

COMPONENT & CRITERIA	SCORING	LEARNING PLAN 1 SCORE	LEARNING PLAN 2 SCORE
GOALS			
Is the goal a learning goal?	Yes = 5 No = 0		
Is the learning objective clearly identified?	Yes = 5 No = 0		
Is the goal related to the specified indicator?	Yes = 2.5 No = 0		
ACTIVIY RECORDS			
Are there sufficient learning activities to demonstrate a full year of learning?	Yes = 5 No = 0		
Are the activities relevant to the learning goal?	Max = 5		
Are the titles and sources of the activities clearly identified?	Max = 2.5		
REFLECTION ON LEARNING			
Is it evident how learning impacted practice or how learning will be integrated into practice?	Max = 15		
Is it evident that new knowledge was acquired?	Max = 10		
COLUMN TOTALS	50		

Total score: ___/100

Auditor’s overall impression of learning plans (please provide comments):
