



Quality Assurance Committee Risk Assessment Tool: Quality Assurance Program Non-Compliance

This tool supports consistent decision-making when assessing the extent to which a member's non-compliance with the Quality Assurance Program (QAP) affects their ability to meet the objectives of the QAP which are to:

- promote continuing competence and continuing quality improvement;
- promote interprofessional collaboration and address changes in practice environment;
- incorporate standards of practice, advances in technology, and changes made to midwifery competencies

Please refer to the Definitions of Risk Categories when completing the tool. Please consider all relevant factors.

Definitions of Risk Categories

Risk Category	Description	Outcome
No or Minimal Risk	<ul style="list-style-type: none"> • Member acknowledges non-compliance and has taken steps to address it • Member does not have a history of non-compliance or other prior history with the College and the information does not support taking any regulatory action • The panel does not have concerns regarding the member's competence 	No action
Low Risk	<ul style="list-style-type: none"> • Member acknowledges non-compliance and is taking steps to address it • Member has a history of non-compliance or other prior history with the College, but the information does not support taking any regulatory action • The panel does not have concerns regarding the member's competence 	Advice/ Recommendations
Moderate Risk	<ul style="list-style-type: none"> • Member does not cooperate with the College and has not taken steps to address non-compliance • Member has a prior history with the College and the information supports taking regulatory action to assure competence • The panel has concerns regarding the member's competence that require formal evaluation of the member's practice 	Peer and Practice Assessment SCERP*
High Risk	<ul style="list-style-type: none"> • Member has been directed to participate in SCERP and has not completed this program successfully • Member displays serious issues of governability in meeting College requirements to such an extent that it cannot or has not been addressed through other avenues and requires serious remedial measures • Information indicates that the member may have committed an act of professional misconduct or may be incompetent or incapacitated. 	TCLs [†] Referral to ICRC

* Pursuant to the Code, the QAC can require individual members whose knowledge, skill and judgment have been assessed and found to be unsatisfactory to participate in SCERPs (specified continuing education or remediation programs)

† TCLs (terms, conditions and limitations) appear on the public register

Level of Risk					
	N/A	No or Minimal Risk	Low Risk	Moderate Risk	High Risk
Cooperation with the College					
<ul style="list-style-type: none"> Submitted late QAP report versus no report Submitted evidence of participating in some QAP activities Submitted the Barriers document Paid \$50.00 administrative fee 					
QAP reporting history					
<ul style="list-style-type: none"> First time non-compliant Pattern of non-compliance 					
Other history with the College					
Registration					
Complaints					
Discipline					
Other factors					
Willingness to address non-compliance					
Reflects on their non-compliance					
Effect on public confidence					
Harms to clients					
Likelihood of recurrence					

Comments	
Member's Name	

Possible Outcomes of QAP Non-Compliance

