

OPTICIANS OF MANITOBA

GUIDELINES FOR REGISTRANTS AND PROVIDERS WHO ARE APPLYING FOR THE
ACCREDITATION OF AN
EDUCATIONAL ACTIVITY

AUGUST 2018

THE ACCREDITATION PROCESS

In order to ensure that activities are available to registrants and that a diversity of activities is offered to them, the OOM encourages all eligible providers of MOC eligible activities to submit applications for accreditation of their education activities to the OOM Quality Assurance Committee or NACOR. The application (**Appendix A**) includes a list of the specific requirements to be included with the application.

ALIGNING THE LEARNING OUTCOMES WITH THE NATIONAL COMPETENCIES FOR OPTICIANS

The content for continuing education competency activities must be developed with the purpose of educating registrants in the knowledge, skills and judgment described in the National Competencies for Canadian Opticians (3rd edition) for the ongoing practice of opticianry.

Providers must identify the specific competencies which relate to the materials and activities they are submitting for accreditation on the application form. The QA Committee will review and determine whether the identified competencies are appropriate before approving an activity for accreditation.

The OOM encourages the development and submission of activities that focus on multiple competencies. An activity may not and is not required however to cover all the performance indicators for each competency. An activity that focuses on only one competency will also be accepted for review.

The example below illustrates how a seminar on a broad topic can cover multiple competencies and their corresponding performance indicators.

| National Competencies | Performance Indicators |
|--|---|
| 1.1 Demonstrate a commitment to patient/client, the public and the profession | 1.1.1 Adhere to privacy and confidentiality legislation, regulatory requirements and employer policies. |
| | 1.1.3 Communicate title and credentials accurately. |
| | 1.1.5 Refer any incompetent, illegal or unethical conduct by colleagues (regulated and non-regulated) or other health personnel to the appropriate authority. |
| 6.1 Demonstrate an understanding of the functionality of the instruments used in the examination of the eye and the implications of the results. | 6.1.4 Interpret the readings and apply your knowledge to inform decisions and actions. |

PREREQUISITES FOR ACTIVITIES

A provider may offer a course with graduated levels of information, basic, intermediate and advanced and may restrict registration in the advanced course to those who have successfully completed the basic level.

FORMAT FOR ACTIVITIES AND INFORMATION PROVIDED TO PARTICIPANTS

- Whenever possible, in person activities should be available in an online format after the presentation.
- Activities should provide opportunities for registrants to interact.
- The level of information presented should be relevant to the target audience.

PREREQUISITES FOR ACTIVITIES

Providers may require pre- requisites for certain activities. A provider may for example offer a course with graduated levels of information, basic, intermediate and advanced and they may restrict registration in the advanced course to those who have successfully completed the basic level.

PROMOTION AND ADVERTISING OF AN ACCREDITED ACTIVITY

Promotional materials (e.g. brochures, advertisements, memoranda, letters of invitation, announcements) should clearly and explicitly include at least the following key informational items:

- Educational goals and specific learning objectives of the particular program
- Nature of the target audience(s) that may best benefit from participation in the program
- Name of the presenter/speaker and their credentials
- Fees for the program and a clear statement of the items that are and are not covered by these fees, as well as any applicable deadlines for pre- program cancellations and fee refunds
- Schedule of the educational activities
- Full description of all requirements established by the provider for the successful completion of the continuing education program and subsequent awarding of credit(e.g. passing a post test at a pre-specified proficiency level, completing a program evaluation form, participating in all sessions or certain combinations of sessions which have been designed as a program package etc.)
- Acknowledgement of outside organizations (if any are providing financial support for any component of the educational activity
- In the case of ongoing programs (mediated and live) the initial release date
- In the case of distance learning/distance modules and other forms of mediated instruction, all of the informational items noted in above should be incorporated directly into the printed, recorded and/ or otherwise transmitted educational activities and materials
- Promotional materials should represent the educational program being offered in a fair and responsible manner.

CREDIT SLIP REQUIREMENTS

The following requirements must be met to ensure that the registrants receive all relevant information pertaining to a completed activity.

- All statements of credit and /or other means of documenting credit must include the following informational items:
 - Name of the optician who participated in the activity
 - License number of the optician who participated in the activity
 - Signature of the optician who participated in the activity
 - Accreditation code/course number if applicable
 - Title of the activity(must be the same as the title given on the accreditation request application)
 - Name of the provider
 - Date of the activity

- Signature of the person responsible for the administration of the activity
- Credits slips should be divisible into three identical sections as follows:
 - Participants copy- to be given to the optician upon successful completion of the activity which they must submit for credits to the OOM
 - Participants copy - given to the optician upon successful completion of the activity for their own records
 - Sponsors record (retained by the sponsor)
- Credits slips should be distributed only following the completion of the activity.
- Duplicate or replacement credit slips should be clearly marked as "Replacement Copy" or "Duplicate Copy".

OVERVIEW OF THE ACCREDITATION PROCESS

- Submit the Request for Accreditation of Continuing Education Application form (**Appendix A**) for each course/activity and presenter, in writing to the QA Committee with any additional documentation required
- The QA Committee will:
 - review the documents submitted by the provider
 - accept and assign a continuing education category (EG, CL, EG or CL, RF,) the number of credits and a code number to the course/activity in keeping with the criteria in **Appendix B**
 - if warranted, assign a credit multiplier to the course/activity as explained in **Appendix C**
 - post the activity on the OOM website including the course/activity code, title, category and number of credits assigned
 - send a letter, fax or email to the provider to confirm the course accreditation

OR

- The application will be rejected
- The provider may submit an appeal to the QA Committee **in writing within 10 days of receipt of the rejection notice.**

SPECIFIC REQUIREMENTS FOR EACH STEP IN THE ACCREDITATION PROCESS

A) Prior to the Activity:

Submit the application form (**Appendix A**) and the accompanying materials below:

- Detailed outline of the topics to be covered
- Copies of actual materials to be used (e.g. course materials)
- Contact information for teachers, presenters or facilitators
- Sources of information with complete citations
- Presentation slides if applicable
- Handouts to be used during the presentation if applicable

B) Schedule for Submitting Applications and Fees:

- A provider may submit an application for accreditation at any time.
- The fees for accreditation of an activity by the Opticians of Manitoba are:

Completed applications received in the OOM office:

- forty five (45) business days or more prior to the start date for the activity \$ 75.00 per activity/course plus PST/GST
- less than forty five(45) days prior to the start date \$150.00 per course /activity plus PST/GST
- for reaccreditation \$50.00 per course /activity plus PST/GST

C) Post activity

Materials

- After the activity is completed the provider must submit any material used or covered that had not previously been submitted to the OOM. The provider must for example resubmit presentation slides if those were updated
- Activity material may be made available by the OOM to participants upon request with the exception of copies of the providers' application forms. The provider may also indicate however on the application form if any of the material cannot be made available for distribution to registrants, due to intellectual property rights.
- Providers are responsible for making materials available free of charge to participants for a minimum of 90 days after completing the activity

APPENDIX A

APPLICATION FOR PROVIDERS FOR THE ACCREDITATION OF CONTINUING
EDUCATION ACTIVITIES

You can submit this form by mail, fax or email. If your activity or course information is available or must be viewed on line, please consider sending this form electronically and providing direct a direct link to the information.

Mailing Address:

Opticians of Manitoba
215-1080 Portage Avenue Winnipeg,
MB R3G 3M3

Email:opticians.ca

Phone: (204) 222 - 8404

Fax: (204) 222 - 5296

PROVIDER CONTACT INFORMATION:

Host/ Affiliated Company/Sponsor: _____

Name and Title of Organization Contact: _____

E-Mail: _____

Phone: _____

Fax: _____

NAME AND TYPE OF EDUCATIONAL ACTIVITY/ES:

- | | |
|----------|----------|
| 1. _____ | 6. _____ |
| 2. _____ | 7. _____ |
| 3. _____ | 8. _____ |
| - - | 9. _____ |
| 4. _____ | |
| - - | |

HOW TO COMPLETE THIS FORM

Complete pages 6-9 for each activity that you wish to be accredited. Please provide the following information:

- Answers to questions 1- 15 on pages 8 and 9
- Copy of course materials /content for the activity (e.g. course outline, power point slides, handouts)

- List of any equipment used for the activity.

- Copy of the posttest required for distance learning courses
- Copy of any test or questionnaire to be completed by registrants before or after the activity.
- Presenter's biography, curriculum vitae or credentials and education
- Copy of any evaluation form registrants will be asked to complete for an activity
- The outline for the activity
- Copy of the form to be used for verification of a registrant's attendance
- Payment according to following chart (**please check off the category**) :

| Form submitted days prior to scheduled event | Cost per course | Check Category selected |
|--|-------------------|-------------------------|
| 30 days prior | \$75.00 plus GST | |
| 15-30 days prior | \$85.00 plus GST | |
| RUSH 15 or less days prior | \$150.00 plus GST | |
| Reaccreditation course/activity code # _____ | \$50.00 plus GST | |

PAYMENT INFORMATION

Total Payment Due \$_____

Method of payment: VISA Certified cheque (payable to the Opticians of Manitoba)

MC Money Order (payable to the Opticians of Manitoba)

I authorize the payment of \$ _____ (total payment authorized)

Name on credit card: _____

Card Number: - - - - - Expiry date. -- / --- CW

Card Signature: - - - - -
=

Title of the person submitting the form: _____

Signature: _____ **Date,:** _____

APPLICATION FOR CONTINUING EDUCATION COURSE/ACTIVITY ACCREDITATION
(Please provide as much detailed information as possible. See Appendix D for a summary of the specific requirements. If this is an application from a study club, please submit Appendix E)

Date form completed: _ _ _ _ _

1. Exact title of the presentation/ activity: _ _ _ _ _

2. Subject: _____

3. Type of activity and materials:

Live presentation Distance learning/online Educational course other

Powerpoint Slides Handouts/Lecture notes Questionnaire Dwebinar

4. Date (s) of activity: _____

5. Location(s) of activity/presentation

Online Other _ _ _ _ _

6. Length of time of the activity/presentation or word count if applicable _____

7. a) Name and Title of Presenter/Teacher (enclose Bio. or CV, spec. professional distinguished affiliation, education)

b.) Sponsor/Company/Provider of Activity _____

8. Learning Outcomes (specific skills, activities or items of information participants will be expected to use in their professional duties can be submitted in a separate document) _ _ _ _ _

9. List of National Competencies covered within this educational activity (can be submitted in a separate document)

10. Is this activity available to all opticians? If no why? _____

11. Level of knowledge or skill required to best benefit participants (entry level, intermediate, advanced), any prerequisites _ _ _ _ _

what is
the ratio

of attendee to work station? __

13. Will registrants be tested? If yes what testing format will be used?

-
14. Will there be an activity evaluation to be completed by registrants? _____
If yes what format will be used? _____
15. Verification of Attendance - If you do not have a form that you will give registrants upon completion of the activity to verify their attendance/participation please

explain how you will verify a registrant's attendance. __ _ _ _ _ _ _ _ _ _

THE FOLLOWING SECTION IS TO BE COMPLETED BY THE QUALITY ASSURANCE COMMITTEE
UPON COMPLETION OF THE REVIEW OF EACH ACTIVITY SUBMITTED FOR ACCREDITATION

Continuing Education Category _____

Credits Awarded _____

Approved by and date _____ All

documents provided _____

Activity audit performed date and by whom _____

Course number assigned _____

APPENDIX B

DETERMINATION OF THE CATEGORY AND NUMBER OF CREDITS TO BE ASSIGNED FOR AN ACTIVITY

CATEGORIES OF CREDITS

Course submissions are considered for accreditation in one of four recognized categories of credits:

- Eyeglasses¹ - EG,
- Contact Lenses² - CL,
- Eyeglasses or Contact Lenses³ - EG or CL
- Related Fields⁴ - RF.

CRITERIA TO BE MET FOR ONE (1) CREDIT

Live presentation (Seminar, Lecture or Workshop)

- Minimum of 45 minutes of actual presentation time (does not include time for set up or questions and answers).
- Speaker biography or curriculum vitae have been submitted for the presenter. For any submission to be considered for an eyeglasses or contact lens credit the speaker/presenter must be one of the following in their jurisdiction, an optician, MD, educator or optometrist. If the presenter has worked at least two full years full time in a specific field, then the presenter will be considered to be sufficiently experienced in that field and therefore will qualify as a presenter for an eyeglasses or contact lens activity.
- A complete copy of all media materials that will be presented has been submitted e.g. power point presentations
- If the activity is a workshop, a list of the equipment that will be used for the workshop, the process of learning and the ratio of attendee to work station has been submitted.

Distance Learning/Distance Modules

- A description of the method used to verify completion has been submitted
- A copy of all media/written materials to be used has been submitted
- Participants are required to achieve a minimum mark of 70% on the post test.

¹ EG - Eyeglasses -topics associated with eyeglass technology e.g. fabrication, fitting techniques, emerging technology and product specific topics related to eye glasses

CL - Contact Lenses- topics associated with contact lens technology e.g. fabrication, fitting techniques, emerging technology and product specific topics related to contact lenses.

EG or CL- Eyeglasses or Contact Lenses - topics applicable to both eyeglasses and contact lens dispensing including refraction, vision screening, low vision, jurisprudence ,patient management, anatomy and/or ocular pathology , Annual general meetings and regulatory presentations are included..

RF- Related Field (General Business/Other) - topics associated with general business practices.

Scholastic (Educational Institution Course)

- A course outline has been submitted.
- A description of the method to be used to verify completion has been submitted

Self-Organized Study Groups

The coordinator has submitted:

- Completed application form - **Appendix E**
- Course outlines or study materials used such as journals or textbooks.
- List of the guest speakers and topics covered If the meeting was a discussion group information on the time commitment
- Method used to verify completion

APPENDIX C

CRITERIA TO BE MET FOR THE ASSIGNMENT OF ADDITIONAL CREDITS

A **maximum of 10 credits** may be awarded for any program or course. Additional credits will be awarded to an activity when:

- The activity is longer than the initial 45 minutes, (each additional 45 minutes will qualify for credits based on the table below.
- Activities that instruct opticians about current research in ophthalmic education and/or medical information to increase ophthalmological skills (other than product presentations) will be awarded the minimum number of credits and receive content multiplier of twice (2x) the sum of the awarded credits.
- Activities which include subject matter identified by NACOR as necessary to train opticians to meet changes in ophthalmic technology or ophthalmic demands of Canadian consumers will receive the minimum number of credits plus a content multiplier of three times (3x) the sum of the awarded credits

| Type of Continuing Education Activity | Time | Credits |
|--|------------------------------|---|
| One hour presentations, industry oriented workshops and seminars | One hour is 45 minutes | One credit hour for the first two hours and half a credit per hour thereafter to a maximum total of 4 credits |
| Distance modules | Minimum 2000 words | One credit (including the questionnaire) |
| Distance modules | 2000-4000 words | Two credits (including the questionnaire) |
| Distance modules | 4000 words or more | Three credits (including the questionnaire) |
| Video, DVD, CD Rom | One hour is 45 minutes | One and a half credit total (including the questionnaire) |
| Questionnaires | Minimum is 10 questions | Half a credit (not applicable to distance delivery courses) |
| Scholastic(educational institution course) | 1 credit for each 45 minutes | One credit/45 minutes of teaching time to a maximum of 10 credits |



The Opticians of Manitoba

"Our Focus Is Your Eyesight"

APPENDIX D

REQUIREMENTS FOR APPLICATIONS FOR ACCREDITATION OF CONTINUING EDUCATION ACTIVITIES

1. Every submission for accreditation must be an exact representation of what will be presented.
2. A completed Request for Continuing Education Activity Accreditation Application must be submitted for each activity or presentation.
3. A detailed outline or course abstract listing specific learning outcomes must be submitted for each course. The educational goals and specific learning outcomes should reflect the relationship of the program topic(s) or content to current Best Practices⁵ in opticianry.
4. The intended audience and content level must be specified.
5. Course content must be generic in nature and presented in an objective manner.
6. The course length and method of presentation must be included on the Request for Continuing Education Activity Accreditation Application.
7. If scenarios and case studies are presented, they must be related to the practice of opticianry which is defined in the Opticians Act.⁶

⁵ Best practice is a method or technique that has consistently shown results superior to Those achieved with other means and are used as a benchmark.

⁶ "optician" means a person who:

(a) prepares and dispenses lenses, including contact lenses, spectacles, eye-glasses, and appurtenances thereto, or any of those things, to the intended wearers thereof, on the written prescriptions of duly qualified medical practitioners or of the holders of certificates of registration under *The Optometry Act*; and

(b) in accordance with such prescriptions interprets, measures, adapts, fits, and adjusts, such lenses, including contact lenses, spectacles, eye-glasses and appurtenances thereto, or any of those things, to the human face for the aid of vision or the correction of visual or ocular anomalies of human eyes

8. Speakers must be qualified by education or experience to provide quality instruction in the relevant subject area for each course they are presenting.
9. An activity must be an organized program of learning that will contribute to the advancement and enhancement of professional competency and scientific knowledge in the practice of opticianry and be designed to reflect the educational needs of opticians.
10. A syllabus or other handout material providing a general outline of the continuing education presentation should be developed and made available to participants at each program offered.
11. The provider shall give evidence to each participant in the form of a statement of credit or other official document of successful completion of the continuing opticianry education program in a timely fashion and such as the participant may reasonably require.
12. The promotion and advertising of each continuing education activity shall be conducted in a responsible fashion.



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APPENDIX E

APPLICATION FOR REGISTRANTS APPLYING FOR ACCREDITATION OF A STUDY GROUP

Name of Study Club Coordinator: - - - - -

License#:

Phone:

Fax;

Email:

Name of study club; _____

Sponsoring Organization (if applicable): _____

Study club session dates:

Duration of each study club session -----Hours

Location of study club: _____

For Study Club Coordinator:

Please attach the following on a separate sheet for approval:

- **Outline of study** (learning objectives, topics to be covered and format of each of study club
- **Study materials:** detailed information and copies of the study material and handouts to be used

For Study Club Members: In order to claim MOC credits for this activity, members must each submit proof of completion of the study club. To prove that you have completed this activity you are required to provide the OOM with a copy of the approved copy of this application which would have been sent to the Study Club coordinator and a written summary /review of each study club session. The written summary /review of study club sessions must include your name, license number, and the signature of each study club participant who was resent.

To be completed by the QOM QA Committee only:

| | |
|--|--------------------------------|
| Approved by: ----- | Date of approval: ----- |
| Number and category of credits to be given following receipt of proof of completion from the study club member: | |
| Expected end date of the study club: | Comments: |

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