Advanced Practice Registered Technologist (Radiation Therapy)

Portfolio Guide

Advanced Practice in Medical Radiation Technology

June 2021

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INTRODUCTION

The first phase of the Advanced Practice Registered Technologist (Radiation Therapy) ("APRT(T)") certification process is the completion and assessment of a portfolio submission.

A portfolio is an integrated collection of documents and commentary gathered from a radiation therapist's recent experiences and assembled to demonstrate their knowledge and skills in relation to pre-established criteria, the APRT(T) Competency Profile. In the context of APRT(T) certification, the portfolio provides candidates with the opportunity to demonstrate the richness of their learning, skills and experience in core clinical, technical and professional domains through a compilation of tangible evidence.

Purpose

The purpose of this guide is to provide candidates and assessors in the APRT(T) certification process with an overview of Phase I - Portfolio Submission.

The APRT(T) Portfolio Guide contains information to help candidates prepare a portfolio of their professional practice; and provides details and explanations as to how the portfolio will be assessed.

This guide includes important information and tips on:

- Portfolio components
- Steps in portfolio development
- Third party evidence
- Assessment criteria
- Examples

The information provided will ensure a fair and transparent process. Please use this information as a guide in preparing or assessing APRT(T) portfolios.

NOTE:

*Candidates are expected to use this guide in conjunction with the **APRT(T) Certification Policies and Procedures Handbook**, and*

Consult with their Advisor prior to submitting their documentation.

Candidate Enquiries

All enquiries about the APRT(T) certification process should be directed to:

Email: aprt@camrt.ca

Professional Practice and Research Department, CAMRT
Telephone: 613-234-0012
Toll-free: 1-800-463-9729
camrt.ca

PORTFOLIO PREPARATION

Portfolio Components

The main components of the candidate portfolio are:

1. Candidate impact statement
2. Competency tables (including summary of activities, elements and explanatory report of knowledge and skills derived from each activity)
3. Evidence, including APRT(T) Portfolio Third-party Letter & Endorsement forms

The electronic APRT(T) Portfolio Template is aligned with the main components listed above and provides candidates with a means in which they can easily record and organize the material they wish to submit for assessment.

This Guide provides instructions and helpful tips on how to use the template in Section Two, Competency Tables. Examples of the Portfolio Template is provided in Appendix C; it demonstrates the use of each section using an example of a previous candidate's portfolio.

Basic Requirements

There are a number of **essential** requirements for all portfolios submitted. They must:

- Comply with the criteria set out by CAMRT,
- Be professional in appearance – lay-out, presentation,
- Begin with a table of contents,
- Be free of spelling and grammatical errors,
- Be well organized,
- Include appropriate references to relevant literature (in radiation therapy),
- Focus on knowledge and skills, not time spent,
- Have well referenced evidence throughout, and
- **Must comply with their institutional confidentiality and privacy policies/regulations*.**
  (*The candidate must also consider any confidentiality/privacy policies in relation to interprovincial transfer of their documents should they work outside of Ontario.)

Timelines

The candidate's submission of their <u>initial</u> portfolio represents the official entry into the APRT(T) certification process, and the "**<u>Start Date</u>**" for their two-year certification period.

Portfolio submissions are accepted based on a submission cycle throughout the certification process and must be submitted by the respective submission deadline. (See the <u>APRT(T) Certification Calendar</u>.)

Portfolio Development

Before developing their portfolio, it is important for candidates to understand that it is <u>not</u> their education or experience that is the focus of this certification phase. The portfolio must concentrate on the relevant **knowledge and skills** <u>derived from their education and experience</u> instead. This is not always as simple as it sounds, so the APRT(T) certification process makes available a number of supports to help candidates (and assessors) with this process, one of which is this Guide.

TIP*: visit <u>APRT(T) Certification Handbooks and Guides</u> for additional resources and supports.*

Portfolio structure and requirements

The types of materials included within a portfolio submission are entirely at the discretion of the candidate. The candidate may choose to use any type of evidence that demonstrates a particular competency. Most portfolio documents are text based; however, a portfolio can also be supplemented by additional forms of evidence such as videos, audiotapes and other sources.

TIP*: Before candidates begin preparing their portfolios, it may be helpful to identify the various areas where they have gained knowledge and skills. Creating an annotated chronology will help to remind candidates of everything they have been involved in that led them to advanced skills in radiation therapy. This chronology is not part of the portfolio but can be an important tool in helping candidates structure their thinking about what they know and can do.*

Candidates' existing resumes should help in this preparation but may not detail other valuable activities such as volunteer committee work or teaching. Candidates can use their chronology as the basis for later steps in the portfolio development process, so it's important to reflect carefully to ensure they have included as much as possible. Be creative!

*This will also help identify the materials they will need to collect as evidence to support the knowledge and skills they gained from the activities listed in the chronology. When the portfolio is complete, candidates may include the chronology as an appendix although it is not required. See **Appendix B** for an example chronology.*

The structure for submission is an organized collection of documents indexed directly to the APRT(T) Competency Profile.

To be considered for assessment, competencies **must** reference evidence mainly from within the **previous five years**. Some forms of evidence that precede this five-year period may be used, but only to support more recent evidence. Examples of older evidence might include education or formal training courses that, although taken more than five years prior, may back up competencies currently practiced.

Portfolio submission

Portfolios are submitted electronically. The format for the electronic submissions and the method to assemble the materials electronically is described in detail further on in the Portfolio Guide. All templates and resources can be found at [APRT(T) Certification Handbooks and Guides](#).

Following submission of the portfolio, it will be checked for completeness and for accordance with the submission guidelines. A correctly submitted portfolio will be sent to assessors for review. Candidates will receive feedback for incorrectly submitted portfolios (see Appendix A – Return Form, Portfolio).

SECTION ONE: IMPACT STATEMENT

Candidates must present an impact statement to orient assessors to their portfolio. The impact statement summarizes the candidate's experiences to date that have expanded their knowledge, skills and judgment and advanced their professional career and practice. The focus of the impact statement is not on a detailed chronology of events. Rather, the candidate should present a picture of their trajectory and impact on practice and the profession, through a synthesis of relevant educational and experiential events and roles.

This statement should be no longer than 1000 words, use a familiar "easy to read" font, and be single spaced.

SECTION TWO: COMPETENCY TABLES

APRT(T) Competency Profile

Competencies are statements about what an APRT(T) should know and be able to do. These statements explicitly state, and implicitly embed, the required knowledge and skills within, and can be found in the left column of the profile.

In the right column of the profile are Indicators of Performance that have been developed to provide a clearer sense of what is included in the competency. It is important to note that candidates are not required to demonstrate achievement of every single indicator. Indicators are intended only to enhance the understanding of each competency.

Building the Portfolio

Candidates will build their portfolios by creating a "competency table" for each competency (see the APRT(T) Portfolio Template on the website). The competency is to be listed at the top of the page, then the candidates will use the tables to itemize their experiences and education that led to the development of competence in this area.

a) **Summary of Experiences** - The candidate will be asked to provide a short "Summary of Experiences" for each competency. Experiences can be wide ranging - academic or experiential learning undertaken through employment, professional development, volunteer work or independent study. Example:

Core PROFESSIONAL Competency

☐ Research/Evidence-Based Practice   ☒ Leadership   ☐ Education

Competency number: Example: "L2"

Competency: "Create and maintain a team to ensure safe and effective practice"

Summary of Experiences: I work within several teams within the head and neck community, both locally and provincially, leading and contributing to various important initiatives such as H&N peer review and interprofessional collaboration. I am engaged more broadly in supervisory roles within my department, both for safe department operations and in the context of the 4th year radiation therapy students from XXXXX education program.

b) **Specific Activities** - From the Summary of Experiences, candidates will be required to call out three specific "Activities" that most clearly speak to the development of competence in this area. After providing a rationale for including this activity to support this competency, a brief list of the knowledge and skills gained through engagement in this activity will be required. It is important for candidates to remember that the emphasis should not be on what they did but rather, what they know and are able to do as a result of the experience. Reflection on and reference to materials that candidates have gathered will help to draw out the knowledge and skills acquired from each experience. Example:

Activity	
Date / Date Range: 2019 - Current	**Description of Activity**: Chairing Working Groups & Initiatives
Rationale for Inclusion: It is important to be able to lead interprofessional groups to short-term goals and long-standing mandates	
List of Knowledge/Skills Gained: Project management, IP collaboration, communication, chairing	

TIPS:

• The portfolio is normally written in the first person.

• The focus should be on the main element(s) of each competency.

• Each competency can be broken down into areas the candidate thinks will be of importance to the assessors. For example, regarding the competency on conducting research, think about the types of research conducted in your field. Explain what you know about conducting research based on your experiences. It is acceptable to use statements such as:

> *"During my experience in the _____ research project, I learned _____"; or*
> *"Knowledge of _____ is a critical component of conducting research in _____. I have gained expertise in this area and have been recognized by my employer through _____."*

The assessors will be looking for evidence whereby the candidate has successfully put knowledge and skills to use. In the above sample, this means knowledge of how to conduct research in your field, and evidence that you have done so. Do not fall into the trap of discussing the content of research you have conducted.

• Be sure to address the depth, breadth, currency, sufficiency, and relevance of your knowledge and skills in each competency. These are the criteria the assessors will use. Again, in the example of research, breadth refers to how broad your knowledge and skills are in conducting research. Depth refers to your level of expertise. Currency indicates how up to date your knowledge and skills are. Sufficiency relates to the extent to which your evidence indicates solid knowledge and skills.

• Do not include evidence that is not referred to in your description of your knowledge and skills. The number of years spent performing a particular task does not in itself indicate adequate knowledge and skill – in this case, at an advanced level. Do not rely solely on reporting your number of years of experience, or the number of research projects you have completed. These are good indicators of experience, but the assessors will be focusing on evidence of what you know and can do as a result of those experiences.

c) **Elements** - The candidate will then be asked to specify the discrete "elements" of the activity that contributed to competence and provide at least one piece of evidence. In many cases, multiple pieces of evidence will help to reinforce the nature, scope, and magnitude of the activity. If the validity of the evidence is not self-evident based on established practices or standards, please include validation through third party evidence (external expert validation of the activity). Example:

Element of Activity	
Description of Element: Chair H&N Peer Review Rounds	
Explanation: - Chairing weekly HN quality assurance rounds (HNQA) for the oncology program at JCC as noted by H&N physics lead (noted strong documentation of clinical issues). This meeting includes reflection of standard of practice, as a team. - These rounds were initiated by me, based on identified need.	
Evidence File Name: JD-EV01-thirdparty-Smoke JD-EV02-thirdparty-Ostapiak	**Type of Evidence**: Third party competency assessment forms
3rd Party evidence submitted: ☒ Yes ☐ No	**Rationale for inclusion of 3rd Party evidence (if included)**: *(rationale)*

SECTION THREE: EVIDENCE DOCUMENTS

Portfolios must include evidence verifying the knowledge and skills that candidates claim to have. If candidates are unable to provide documentation that fully verifies their knowledge and skills, they may suggest additional mechanisms for the assessors to consider.

The evidence to support candidate knowledge and skills can include a wide range of items. Evidence should showcase the breadth, depth, currency, sufficiency and relevance of candidates' knowledge and skills. Listed below are the types of items candidates might consider including in their portfolios. Candidates may also have additional ideas on verifying evidence that have not been presented here.

Candidates are encouraged to use the <u>minimum</u> number of pieces of evidence to make their point.

Types of Evidence

- Work samples – reports, email exchanges, etc.
- Chart audits of completed cases
- Job descriptions
- Performance appraisals
- Letters from employers, supervisors (see section on "third party evidence")

- Letters from teachers (see section on "third party evidence")
- Minutes of meetings
- Academic transcripts
- Professional development transcripts
- Course descriptions
- Video tapes
- Written descriptions and analyses
- Awards, grants or scholarships
- Reflective practice paper
- Presentation materials

Third Party Evidence

General

Candidates may obtain indirect evidence from third parties to help substantiate their claims for an element of a competency. This should only be used in situations where the candidate's role in the work does not speak for itself and where third-party attestation is required. The following guideline is designed to build an understanding of this type of evidence.

Main Elements
- Third parties should explain their professional relationship with the candidate and provide their contact information.
- Third parties should review the competencies and indicators of performance they are being asked to evaluate, before making their report.
- Third-party reports should provide a determination as to the level of the candidate's knowledge and skills.
- Third-party reports should be sent directly to CAMRT.
  (See contact for "Candidate Enquiries").

A Portfolio, Third Party Evidence Letter & Endorsement Form are provided on the CAMRT website (see APRT(T) Certification Handbooks and Guides) to help candidates obtain valid and reliable evidence from third parties. The amount of weight placed on a third-party report will be determined by how well the third party understands the competencies and the candidate's knowledge and skills. Third parties should be prepared to be contacted by assessors, via CAMRT, to clarify certain points if required. If assessors consider it necessary to contact third parties directly, they should do so and document the results.

For Research Competencies

When dealing with research-related competencies, there are certain assumptions that can be made based on broadly accepted research practices. In many cases, as long as these practices were followed by the candidate when conducting, presenting or publishing research, third-party evidence will not be required to further validate the candidate's role in a submitted element of competency.

Assumptions:

- For published research it will be assumed that the authorship guidelines of the International Committee of Medical Journal Editors ([Roles and responsibilities / Defining the role of authors and contributors](#)) were followed. This means that the first listed author is assumed to have led the work and contributed significantly to all stages of the research. The last author listed is generally the senior author, who is also seen as a significant contributor to all aspects of the work, generally as a mentor or subject matter expert. Third-party clarification of the role in research is only necessary for authors in positions that are NOT first or last, or when the convention mentioned above wasn't followed (i.e., the last author is NOT the senior author or when authors are listed alphabetically). In these situations, third-party evidence should be employed to define the specific role of the candidate in the research (i.e., data collection, analysis, writing, etc.)

- For presentations (poster or podium), the first listed author will similarly be considered the most significant contributor to the work. While generally the first listed author is also the presenter, there are times where another author presented the work on the first author's behalf. If the candidate is the first author and presented the work, no third-party evidence is required. If the candidate appeared elsewhere in the authorship list, and/or wants to prove a greater contribution than is indicated by authorship, third party evidence is necessary from a more senior contributor to the work to attest to the role of the candidate. Technically, being the presenter does not necessarily warrant being listed as first author, but if this practice was followed, third party evidence should clarify this and explain the role in the work.

- For any peer-reviewed publication or presented work, the quality of the work can be attested to by the fact that it was accepted for publication/presentation, with value attributed to the reputation of the conference or publication (local versus national/international, journal impact factor, etc.) This information can all be verified objectively and does not require explanation from a third party.

In summary, it is only in situations where the candidate's role in the work does not speak for itself (based on authorship order or status of the forum in which it is presented) where third-party attestation is required for an element of a research competency. If traditional practices were not followed, and authorship order or peer review status might be misleading, third-party clarification is also required. Portfolio reviewers will appreciate the generally accepted practices, and in absence of other information will assume the scope and quality of the candidate's work based on such practices.

Template and Evidence Documents: Process

Once candidates submit their payment form to register in the certification process, CAMRT will provide information on how to submit their portfolio documentation.

The candidate's portfolio template and supporting evidence documents should then be sent in. CAMRT will receive third-party evidence directly from authenticators and will add it to the candidate's submitted documentation. (Candidates will not have access to the third-party evidence). However, the candidate will be sent a list that will include Case ID, competency, and name of the authenticator, for their verification to ensure all third-party evidence has been received at CAMRT.

Naming Files

Prior to submitting evidence as per the Portfolio Guide/Template, you will be expected to adhere to the following file naming format.

<u>Example</u>: John Doe took a course on how to conduct a survey, and this was his forth piece of evidence submitted.

Information included in the file name format	Example
- Your initials - The evidence number (EV##) - A brief description of type of evidence	- **J**ohn **D**oe - **Ev**idence number **04** (4th submitted) - Type of evidence (**transcript** from course)
	Example File Name: JD-EV04-transcript

All information will be available to assessors based on the Portfolio Template via an online document sharing platform. CAMRT will follow the file nomenclature while loading confidential third-party evidence in their document sharing portal.

If candidates intend to request evidence from third parties, they should provide them with copies of the Portfolio Third Party Evidence Letter & Assessment Form and the APRT(T) Competency Profile (see APRT(T) Certification Handbooks and Guides). Candidates will also need to advise their Third-Party authenticator(s) which competency(ies) they are being requested to assess.

Candidates will request their third-party authenticators to compile their endorsements and send them (confidentially) **directly** to:

Email: aprt@camrt.ca

SECTION FOUR: After Submission

Portfolios will be evaluated by assessors experienced in competency-based assessment. All precautions will be taken to ensure that conflicts of interest are avoided.

The assessment of the portfolio is based on successful demonstration of competencies as delineated in the APRT(T) Competency Profile. The evidence provided for each competency will be assessed and graded using a scoring rubric that adds the score for each individual competency to create overall scores by domain.

Several factors will be considered when the assessors examine the evidence in candidates' portfolios. These factors are:
- Breadth of knowledge and skills,
- Depth of knowledge and skills,
- Currency of knowledge and skills,
- Sufficiency of information to make a reasoned judgment,
- Relevance of evidence to required competencies,
- Authenticity of evidence.

Assessors are asked to review candidates' evidence and exercise their best judgement on the extent to which candidates have demonstrated the knowledge and skills required to be an APRT(T).

The number of years spent performing a particular task does not in itself indicate adequate knowledge and skill, in this case, at an advanced level. Candidates are advised not to rely on quantity-based evidence such as the number of years of work experience, or the number of research projects they have completed. These are good indicators of experience and as such are useful to include in a portfolio, but assessors will focus on evidence of what candidates know and can do as a result of those experiences.

Assessment Criteria

Assessors will review the content of each competency, review the relevant activities and associated evidence presented in each portfolio, and determine a score. The assessment of evidence will be carried out for each individual competency, and will be graded using a 4-point Likert scale, where:

0 = Insufficient or out of date evidence – there is no evidence to support that the competency has been met or the competency is being performed at the expected level of an APRT(T); or, all evidence is more than 5 years old

1 = Partial evidence – documentation shows that the competency is being at least partially met, although documentation may be subjective or not clear

2 = Sufficient evidence – some objective documentation that the competency is being at least partially met

3 = Excellent evidence – complete and objective documentation that the competency has been achieved

Appendix C includes a series of portfolio assessment examples. Reviewing these examples may be helpful for both candidates and assessors, as the series is designed to assist assessors in determining what score should be assigned to the competencies, as well as provide insight to candidates regarding the scoring process.

Refer to "Portfolio Assessment", in section C, of the APRT(T) Certification Policies and Procedures Handbook for additional information on scoring, assessment and notification of assessment status.

HELPFUL RESOURCES for Portfolio Development

Boonarzian, S. (1994). Learner guide to prior learning assessment at Cambridge College. Cambridge, Mass.: Cambridge College Center for Learning and Assessment Services.

Bridges, M. (1997). [Ed.] Career planning and adult development journal - Special issue: Portfolios. San Jose: Career Planning and Adult Development Network.

CAMRT (2013). Continuing Competence through Professional Development: A Guide for Program and Professional Portfolio Development. Ottawa, Ont.: CAMRT

Lambdin, L. (1997). Earn college credit for what you know. Chapter Seven. Chicago: CAEL.

Mandell, A., Michelson, E. (1990), Portfolio development & adult learning: Purposes & strategies. Chicago: CAEL.

Appendix A. Return Form, Portfolio

(*A copy of this form will be provided to the candidate.*)

The portfolio of candidate _____

(Please check all that apply).

Did NOT:

☐ Comply with criteria set by CAMRT

☐ Begin with a table of contents

☐ Have design and formats appropriate for the intended audience

☐ Contain a clearly explained purpose in each section

☐ Include appropriate references to relevant literature in radiation therapy

☐ Focus on knowledge and skills, not time spent

☐ Comply with the CAMRT template

☐ Anonymize all patient identifiers

☐ Follow with indicated Third-Party documentation

Was NOT:

☐ Free of spelling and grammatical errors

☐ A manageable length

☐ Well organized

_____

 Assessment Representative

_____

 Date

Appendix B. Sample Chronology

- 2003 Graduated from George Brown College with a three-year diploma in health care management. (Collected course outlines and transcripts).

- 2004 Got a job at the Ontario Ministry of Health designing and managing a summer employment program for students studying health care management. (Collected performance appraisal and job description).

- 2005 At the end of the nine-month contract became a researcher at the Office of the Ontario Ombudsman. Conducted interviews, communications with a wide range of government offices to informally resolve complaints.

- 2006 Became an investigator specializing in social and health policy. For example, one of my investigations resulted in provincial assistance to all new mothers who needed electric breast pumps to feed their babies.

- 2008 Specialized in research, critical analysis, report writing, advocacy, client and government interviews, conducted presentations, worked independently and in teams. I prepared Office's first policy on HIV/AIDS (copy of policy and minutes of committee meetings).

- 2010 Became Assistant Director of Investigations where I learned to supervise, give direction, take direction, make decisions, and learn from others. I specialized in investigations of complaints related chronic diseases. I took a public-speaking course. (Have video on speaking assessment).

- 2011 Enrolled in Ryerson University to obtain a Bachelor of Science in Nursing. I also worked part-time in a childcare centre and volunteered at the Canadian Cancer Society. I provided emotional support to cancer patients (Have letters from patients, correspondence from childcare centre).

- 2016 Following graduation, I accepted a position at St. Michael's hospital. I worked the evening shift and continued with my studies on a part-time basis. (Have job description, letter of evaluation, course information.)

- 2018 Transferred to the Hospital for Sick Children and the pediatric cancer unit. I was asked to sit on a hospital research team on new diagnostic interventions and public consultations and developing public policy proposals for government funding for two new cancer treatments.

Appendix C. Portfolio Examples

The following portfolio examples are meant to help candidates and assessors reflect on the quality of the evidence submissions.

Objective

The Portfolio Guide describes in depth how and what a candidate should consider when putting together their portfolio for submission. Based on the principles of Prior Learning Assessment and Recognition (PLAR), this series of portfolio assessment examples are designed to assist assessors in determining what score should be assigned to the competencies in the portfolio review, as well as provide insight to candidates regarding the scoring process. All assessors should be familiar with the content of the APRT(T) Portfolio Guide as it explicitly identifies the expected content to be documented in the candidate's portfolio competency table.

Portfolio Design

There are three templates to cover the APRT(T) Competency Profile's domains: Core Clinical…, Core Technical…, and Core Professional Competencies. The latter has been further subdivided into a) Research and Evidence-Based Practice, b) Leadership, and c) Education. Candidates' portfolios should indicate they are able to perform these competencies at an advanced level.

The portfolio templates have been designed to follow a logical sequence and each has been built in table format. The template header indicates the **"Competency"** and includes the respective "Summary of Experiences" required by the APRT(T) for that competency. In the first table, applicants will identify any relevant **"Activities"** they have undertaken to validate the competency. The second table called **"Element of Activity"** is where applicants can write a narrative in which they describe the knowledge or the skills they have attained based on the information in the first table. The second table also identifies the **"Evidence"** provided to support the achievement of the competency and performance related to relevant activities.

In practice this will look like this:

Example 1: Core PROFESSIONAL Competency

☐ Research/Evidence-Based Practice   ☒ Leadership   ☐ Education

Competency number: L2

Competency: Create and maintain a team to ensure safe and effective practice

Summary of Experiences: I work within several teams within the head and neck community, both locally and provincially, leading and contributing to various important initiatives such as H&N peer review and interprofessional collaboration. I am engaged more broadly in supervisory roles within my department, both for safe departmental operations and in the context of the 4th year radiation therapy students from the Mohawk-McMaster program.

Activity	
Date / Date Range: 2019 - Current	**Description of Activity**: Chairing Working Groups & Initiatives
Rationale for Inclusion: It is important to be able to lead interprofessional groups to short-term goals and long-standing mandates	
List of Knowledge/Skills Gained: Project management, IP collaboration, communication, chairing	

Element of Activity	
Description of Element: Chair H&N Peer Review Rounds	
Explanation: • Chairing weekly HN quality assurance rounds (HNQA) for the oncology program at JCC as noted by H&N physics lead (noted strong documentation of clinical issues). This meeting includes reflection of standard of practice, as a team. • These rounds were initiated by me, based on identified need.	
Evidence File Name: JD-EV01-thirdparty-Smoke JD-EV02-thirdparty-Ostapiak	**Type of Evidence**: Third party competency assessment forms
3rd Party evidence submitted: ☒ Yes ☐ No	**Rationale for inclusion of 3rd Party evidence (if included)**: *(rationale)*

Element of Activity
Description of Element: H&N Community of Practice Working Groups
Explanation:
• Lead for the HNCoP Working Group tasked with piloting eOutcomes-HN prospective data collection project at JCC. The goal of the outcomes collection initiative is to collect outcomes at a provincial level to drive quality improvement initiatives and ensure that all H&N patients receive appropriate and quality radiation treatment.   • Lead for of the HNCoP Working Group tasked with developing standardized consensus for nomenclature and contouring target volumes in Ontario.

Evidence File Name:	Type of Evidence:
JD-EV01-thirdparty-Smoke JD-EV02-thirdparty-Ostapiak	Third party competency assessment forms
3rd Party evidence submitted: ☒ Yes ☐ No	**Rationale for inclusion of 3rd Party evidence (if included)**: *(rationale)*

Element of Activity
Description of Element: Initiation of Dental Assessment Clinic
Explanation:
• Led and planned a dental assessment clinic staffed with a dental hygienist to function in parallel with HN follow-up clinic. This initiative is anticipated to be implemented in February 2021.   • Clear vision to establish goals and objectives, set timelines, and delegate tasks to team members, disseminate information and propose changes.

Evidence File Name:	Type of Evidence:
JD-EV01-thirdparty-Smoke	Third party competency assessment forms
3rd Party evidence submitted: ☒ Yes ☐ No	**Rationale for inclusion of 3rd Party evidence (if included)**: *(rationale)*

Activity	
Date / Date Range: 2015-Current	**Description of Activity**: Supervision
Rationale for Inclusion: Ability to oversee students as individuals and as groups can help students to learn positive team behaviours, and supervisory duties for staff can ensure safe practices	
List of Knowledge/Skills Gained: Research skills, communication, provision of feedback, general management of clinical environment	

Element of Activity

Description of Element: Research Supervision (4th year RTT)

Explanation:

- Master's thesis supervisor notes skill at guiding students through research and identifying resources needed for both students and patients to meet project goals (and works with the school to provide grades etc)

Evidence File Name:	**Type of Evidence**:
JD-EV15-thirdparty-Farrell	Third party competency assessment forms

3rd Party evidence submitted:	**Rationale for inclusion of 3rd Party evidence (if included)**:
☒ Yes ☐ No	*(rationale)*

Element of Activity

Description of Element: Mentorship in H and N rotations (4th year RTT)

Explanation:

- Performance evaluation of students in H and N rotation
- Coordinates exposure to relevant clinical terms

Evidence File Name:	**Type of Evidence**:
JD-EV15-thirdparty-Corning	Third party competency assessment forms
3rd Party evidence submitted:	**Rationale for inclusion of 3rd Party evidence (if included)**:
☒ Yes ☐ No	*(rationale)*

Element of Activity

Description of Element: Staff Supervision (in absence of RTT supervisor)

Explanation:

- Knowledge to perform casual supervisory duties to monitor safe departmental operations as well as ensure patient and staff safety
- As attested by RTT manager: Also, when the supervisors in radiation therapy are absent, I will act in the supervisory capacity. The large radiation therapy department (over 100 staff) require supervision at all times. The Supervisor directs the daily operation and responsibilities include the planning and organizing of workload and resources, interpreting policy and training staff

Evidence File Name:	**Type of Evidence**:
JD-EV01-thirdparty-Smoke	Third party competency assessment forms
3rd Party evidence submitted:	**Rationale for inclusion of 3rd Party evidence (if included)**:
☒ Yes ☐ No	*(rationale)*

Activity	
Date / Date Range: 2015-Current	**Description of Activity**: Mentorship and evaluation of students
Rationale for Inclusion: Mentorship involves ensuring effective team integration, navigation, and communication, as do development of related programs with sufficient buy-in	
List of Knowledge/Skills Gained: Project management, provision of feedback, managing student/patient experience, communication, safe practice	

Element of Activity	
Description of Element: Curriculum Building for Mentorship Program	
Explanation: • Clinical educator speaks to development of mentorship program including establishing curriculum, getting stakeholder buy in, coordinating objectives and performance evaluation of students	
Evidence File Name: JD-EV15-thirdparty-Corning	**Type of Evidence**: Third party competency assessment forms
3rd Party evidence submitted: ☒ Yes ☐ No	**Rationale for inclusion of 3rd Party evidence (if included)**: *(rationale)*

Element of Activity	
Description of Element: Coordination/Navigation of graduate students	
Explanation: • Informal mentorship of graduate students (including PhD) • Facilitates navigation of clinical spaces and teams for those unfamiliar with cancer care environment (especially within H and N team), mindful of safe/ethical practices (i.e., Confidentiality) • Facilitates appropriate interactions with patients	
Evidence File Name: JD-EV02-thirdparty-Ostapiak JD-EV16-thirdparty-Farrell	**Type of Evidence**: Third party competency assessment forms
3rd Party evidence submitted: ☒ Yes ☐ No	**Rationale for inclusion of 3rd Party evidence (if included)**: *(rationale)*

For this specific competency, *"Create and maintain a team to ensure safe and effective practice",* the candidate "JD" submitted activities and elements with only third-party supporting evidence, with less evidence for the activity "Mentorship and evaluation of students". Therefore, **this competency would not receive a full score but may be scored between a 1 and 2.**

Example 2: Core PROFESSIONAL Competency

☒ Research/Evidence-Based Practice   ☐ Leadership   ☐ Education

Competency number: R1

Competency: Conduct original research to contribute to the professional knowledge base

Summary of Experiences: I conducted a series of studies that focused on identification of process gaps and bottlenecks in palliative radiotherapy practice that might require implementation of new service. This included assessing the clinical impact of a CSRT role (such as mine) on expediting radiotherapy for symptom management and continuity of care for patients completing palliative XRT. New services and tools developed and investigated included the use of electronic communication for virtual patient follow-up, examination of the effectiveness of a Palliative Radiation Treatment Summary (PaRTS), and development, evaluation, and piloting of a graphical clinical decision-making tool called Osteomapper.

Activity	
Date / Date Range: 2015 - 2019	**Description of Activity**: Identification of areas for research to improve palliative care workflow & patient experience
Rationale for Inclusion: Identifies areas for research" is key indicator of performance & RTT perspective on patient need can be unique	
List of Knowledge/Skills Gained: Appreciation of gaps/bottlenecks in practice, needs assessments, piloting new tools, collaboration & business case for research	

Element of Activity	
Description of Element: **Osteomapper -** Develop, evaluate and pilot online graphical tool that may help facilitate clinical decisions for patients returning for repeat radiotherapy	
Explanation: - Dr. Levin, physicist Douglas Mosley and I pitched the idea to Hacking Health. We also signed an "Invention Disclosure Form" for UHN at that time. The concept was ours. - In 2018, PROP Team felt that RO fellow Han Kim should take the lead of the initiative to move the project forward with momentum. I remained heavily involved.	
Evidence File Name: JD-EV03-email-invitation JD-EV04-video-Osteomapper	**Type of Evidence**: Email confirmation of presentation at conference Video describing initiative
3rd Party evidence submitted: ☐ Yes ☒ No	**Rationale for inclusion of 3rd Party evidence (if included)**: Click here to enter text.

Element of Activity
Description of Element: **PaRTS -** Examine effectiveness of a Palliative Radiation Treatment Summary (PaRTS) given to patients on completion of palliative XRT as a point-of-care and educational tool for self-management of side effects
Explanation:

- Top Innovate abstract at RTi3 Conference 2018.
- Abstract represented work to examine effectiveness of PaRTS. I was first author.

Evidence File Name:	**Type of Evidence**:
JD-EV05-article-RTi3	Published work, journal article, Conference proceedings RTi3
3rd Party evidence submitted:	**Rationale for inclusion** (if "yes"):
☐ Yes ☒ No	Click here to enter text.

Element of Activity
Description of Element: **Electronic Communication Tool For F/U -** Explore the feasibility of electronic communication technologies for virtual follow-up of patients after completion of palliative XRT
Explanation:

- Represents feasibility assessment for new service in palliative radiotherapy followup, which I led as my MHScMRS project

Evidence File Name:	**Type of Evidence**:
JD-EV13-poster	Presented work, Poster
Evidence File Name:	**Type of Evidence**:
JD-EV-14-transcript-UoT	Academic transcript, UoT
Evidence File Name:	**Type of Evidence**:
JD-10-Masters-Thesis	Other: Masters' thesis paper
3rd Party evidence submitted:	**Rationale for inclusion of 3rd Party evidence (if included)**:
☐ Yes ☒ No	Click here to enter text.

Activity	
Date / Date Range: 2013 - 2019	**Description of Activity**: Conduct research
Rationale for Inclusion: Importance of appreciating and being able to navigate the research process & related tasks	
List of Knowledge/Skills Gained: Literature reviews, data collection & analysis, leading research teams	

Element of Activity	
Description of Element: Led multiple interprofessional research teams in the conduct of research	
Explanation: • 4 abstracts/presentations relating to research that include me as first author, with various interprofessional collaborators	
Evidence File Name: JD-EV06-poster-2013	**Type of Evidence**: Presented work, poster, CARO 2013
Evidence File Name: JD-EV07-poster-20147	**Type of Evidence**: Presented work, poster, CARO 2017
Evidence File Name: JD-EV05-article-RTi3	**Type of Evidence**: Published work, journal article, Conference proceedings RTi3
Evidence File Name: JD-EV09-presentation-RTi3	**Type of Evidence**: Other: Non-peer reviewed Hacking Health presentation
3rd Party evidence submitted: ☐ Yes ☒ No	**Rationale for inclusion of 3rd Party evidence (if included)**: Click here to enter text.

Element of Activity	
Description of Element: Followed scientific method in leading all aspects of a research project	
Explanation: • As per MHScMRS course outline, required me to initiate and develop study project proposal and design, submit for approval by Research Ethics Board, and fulfill all other elements of conducting research • Course passed successfully	
Evidence File Name: JD-EV10-thesis	**Type of Evidence**: Other: Masters' Thesis Paper
Evidence File Name: JD-EV11-crs-desc-MSC1508H	**Type of Evidence**: Course description, MSC1508H
Evidence File Name: JD-EV14-transcript, UoT 2015	**Type of Evidence**: Academic transcript, UoT 2015 (MSC1508I)
3rd Party evidence submitted: ☐ Yes ☒ No	**Rationale for inclusion of 3rd Party evidence (if included)**: Click here to enter text.

Activity	
Date / Date Range: 2013 - 2019	**Description of Activity**: Dissemination of research results
Rationale for Inclusion: Knowledge transfer is critical element of research, to ensure community benefits	
List of Knowledge/Skills Gained: Oral presentations (speaking & PowerPoint building), poster preparation, writing abstracts and manuscripts for peer review	

Element of Activity
Description of Element: **Award-Winning Conference Presentations -** at respected conferences (CARO ASM & COMP Winter School)

Explanation:
• RTi3 2018 Top Innovate Abstract submission • The submission of the abstract to COMP for the Scholarship Competition was supposed to go through the Therapist stream, but as I was away on vacation, I wrote the abstract, sent it to the Fellow to edit/read over, and whilst I was on vacation, the PROP Team's radiation oncologists felt that the Fellow should enter it under the Resident/Fellow stream. It won the Top Abstract, however, as the PROP Fellow could not attend the conference (due to personal reasons) to present the work, and the Scholarship Committee would not allow me to present on his behalf as I was not a MD (but a RT), the Competition then had Co-Winners because they awarded the presentation slot to the runner-up, Dr. Kathy Rock. (I have written Dr. Han Kim to send me an email/letter to attest to my involvement with OsteoMapper, and have yet to hear back – he is now back in New Zealand working as an RO).

Evidence File Name: JD-EV12-scholarship-COMP-2019	**Type of Evidence**: Scholarship winner
Evidence File Name: JD-EV05-article-RTi3	**Type of Evidence**: Published work, journal article, Conference proceedings RTi3
3rd Party evidence submitted: ☐ **Yes** ☒ **No**	**Rationale for inclusion of 3rd Party evidence (if included)**: Click here to enter text.

Element of Activity
Description of Element: **Manuscript - i**n progress for MHScMRS Thesis

Explanation:
Click here to enter text.

Evidence File Name: JD-EV10-thesis	**Type of Evidence**: Other: Masters' Thesis Paper
3rd Party evidence submitted: ☐ **Yes** ☒ **No**	**Rationale for inclusion of 3rd Party evidence (if included)**: Click here to enter text.

Element of Activity
Description of Element: Conference Presentations

Explanation:
• Examples of posters presented • CV includes X peer-reviewed presentations and posters over past 6 years at various forums (CARO, COMP, RTi3, UICC etc.)

Evidence File Name: JD-EV06-poster-2013	**Type of Evidence**: Presented work, poster, CARO 2013
Evidence File Name: JD-EV04-poster-2017	**Type of Evidence**: Presented work, poster, CARO 2017
3rd Party evidence submitted: ☐ **Yes** ☒ **No**	**Rationale for inclusion of 3rd Party evidence (if included)**: Click here to enter text.

Element of Activity
Description of Element: Networking Dissemination
Explanation:
• Presented work to disseminate results of project initially proposed in this forum

Evidence File Name:	Type of Evidence:
JD-EV03-email-invitation	Email confirmation of presentation at conference

3rd Party evidence submitted:	**Rationale for inclusion of 3rd Party evidence (if included)**:
☐ Yes ☒ **No**	Click here to enter text.

For this specific competency, "Conduct original research to contribute to the professional knowledge base*",* the candidate "JD" submitted activities and elements with substantial evidence; however, the role of the candidate, specifically in the research activities, could have been better articulated. Therefore, **this competency would receive a score of 2.**