

Policy

Type:	General		
Number:			
Name:	Policy, Document and Material Development and Review Framework		
Status:	Approved	Version #:	1
Date Approved:	December 5, 2022	Date Revised:	

Background

Health profession regulatory Colleges are expected to operate in a manner that is seen as transparent, objective, impartial and fair. College functions are set out in legislation (the *Regulated Health Professions Act, 1991*, as well as the *Kinesiology Act, 2007*), with the College having the ability to develop and apply operational policies and other materials intended for registrants and/or the public. In keeping with these duties, the College of Kinesiologists of Ontario (“the College”) has developed this Policy, Document and Material Development and Review Framework (“the Framework”).

The Framework will support the College’s public protection mandate by ensuring that materials created and published by the College are clear, concise, consistent, up-to-date and compatible with all applicable legislation.

The Framework is intended to describe and govern the following processes:

- Development of new Policies that govern College operations.
- Development of new materials (such as Practice Standards and Guidelines) that direct and guide registrants’ practice.
- Development of new materials intended for use by other stakeholders in the Province of Ontario, as well as materials intended for review by the general public.
- Review and update of currently existing Policies, Practice Materials and other documents and materials.

Policy

General

1. The Framework incorporates a cyclical, stage-based approach based on Public Health Ontario’s “Eight Steps for developing healthy public policies” (see Appendix A for a visual representation).
2. The Framework and the associated processes are intended to be used as a guide and resource, with some flexibility where a particular need, issue, problem or proposed policy/document/other material may require an approach that differs or diverges from the

Framework.

3. For the purposes of this framework, College operations will be divided into the following portfolios:
 - Registration
 - Professional Practice
 - Professional Conduct
 - Finance and Operations
 - Communications
4. In the event of inconsistency between legislation, regulatory best practices and the Framework and/or portfolio-specific practices, the legislation shall govern.
 - In the event of inconsistency or incompatibility between all or part of the Framework and best practices applicable to a given College portfolio, the latter may govern.
5. The process set out in this framework should be documented and tracked (example trackers are included as Appendices to this Framework).
6. All policies, standards, guidelines and other materials developed in accordance with this Framework will be published in accordance with any applicable College-approved templates and style guides.
7. Development of a new materials and review/revision of existing materials can be initiated by:
 - New regulations
 - Legislative changes
 - Process or resource changes
 - Council or Staff recommendations
 - Internal portfolio reviews by staff
 - Changing evaluation of risks that pertain to the College, the public and/or the profession
 - Other issues that may arise
8. One or more of the following measures may be used to conduct an environmental scan:
 - Review of internal data/information from various College portfolios (ICRC, Discipline, Fitness to Practise, Practice

Step 1: Identify, describe and analyze the need, issue or problem

Step 2: Identify and analyze options to address the need, issue or problem

Advice, Registration, Quality Assurance). This review will be weighted, in most cases, towards aggregate data and trends rather than specific or individual instances.

- Review of applicable published reports from other Colleges (e.g. College Performance Management Framework, Annual Reports, Strategic Plans)
- Literature review or other research activities to determine best practices
- Review of regulatory practices in the College's jurisdiction, as well as national and international regulatory practices where appropriate and relevant
- Identify the type of document/material that most closely addresses the need, issue or problem
- Where possible, an Equity, Diversity, Inclusion and anti-Bias (EDI-B) lens will be applied to the need, issue or problem

9. The environmental scan/consultation process should take place over a 60-day period. This timeline may be extended or reduced depending on circumstances and with approval by the individual or body responsible for the material development or review process (i.e., Council, the Registrar/CEO or the Director or Manager of the College Portfolio).

10. Once complete, the environmental scan should result in a clear problem statement based on consideration and analysis of an issue that may have emerged. This statement will include a public interest statement.

Step 3: Determine and understand stakeholders, decision-makers and influencers

11. The process of identifying and inviting stakeholders to support material development and review will include an EDI-B lens in recognition of the diverse and unique perspectives and knowledge.

12. Develop a list of stakeholders and Subject Matter Experts (SMEs) who may be impacted by the material that will be created or reviewed.

13. Develop a list of key decision-makers and influencers who may be affected by and responsible for the implementation of the final material, as well as what influence they may have.

14. Once identified, stakeholders, decision-makers and influencers may be consulted for their perspective(s) on the issue.

Step 4: Assess readiness for policy/document/other material development

15. The following analytical framework (which incorporates risk-based assessment as well as a right-touch regulatory approach) will be applied to the proposed policy/document/other material:

- Effects:

- i. Effectiveness
- ii. Unintended Effects
- iii. Equity (e.g. Equity Impact Assessment)
- Implementation:
 - i. Cost
 - ii. Feasibility
 - iii. Acceptability

16. In addition to the above analytical framework, a logic model may be used to evaluate connections between the need, issue or problem, the proposed solution and the desired outcome.¹

Step 5: Develop an action plan

17. The action plan will include the following:

- The nature of the material to be created, and whether a new document is required or an existing document will be revised.
- Expected date(s) of internal review (e.g. various drafts, internal review of communication/implementation plan)
- Expected date(s) for preliminary consultation period(s)
 - External review/consultation may include legal review or other Subject Matter Expert (“SME”) consultation regarding the proposed/revised material(s)
 - The length of this preliminary consultation period may be, where permissible, determined by the College staff most responsible for the material development or review
- Expected date(s) of initial Committee review and referral to Council
- Expected date(s) of initial Council review and any Council-approved or required external consultation
 - The length of any external consultation may be set

¹ The following resources provide guidance regarding the use of logic models:

https://www.ncchpp.ca/docs/LogicModeleLogique_En.pdf

[State Heart Disease and Stroke Prevention Program Evaluation Guide: Developing and Using a Logic Model Evaluation Guide \(cdc.gov\)](#)

out in legislation (i.e., 60 days) or, if not set out in legislation, determined by College staff

- Expected completion date (including final approval by Council)
- Communication planning (to be directed by and coordinated with Communications staff)
- A plan to embed the material into College programs
- A plan to update related/associated College materials to accurately reflect new materials or revisions to existing materials.

Step 6: Implement the action plan

18. New materials (policies, standards, guidelines or other documents) will be created using the College's Style Guide and any relevant templates.

19. Review of existing materials will be conducted using change/edit tracking features, with the original content preserved for the duration of the review/revision process.

20. All changes, edits and revisions to materials (whether new or existing) will include reference to the rationale for the change to facilitate.

- Edit tracking may be accepted and comments may be removed once the material has been approved for publication.
- Versions/drafts submitted for external consultation may be published without edit tracking/comments, provided that a draft or master copy with comments/edit tracking is preserved.

21. Progress towards milestones to be reported as appropriate or necessary.

22. Progress may not always proceed in a linear fashion. As more information becomes available or is requested, earlier stages of the process may be revisited (or may occur at the same time as ongoing work is done on developing the material)

Step 7: Facilitate the adoption and implementation of the policy/document/other material that has been developed

23. Communication plans regarding material created or reviewed according to the Framework (with key performance indicators in place (where possible) to ensure effectiveness) fall under the College's Communications portfolio and will be overseen by Communications staff.

Step 8: Monitor and evaluate policies/documents/other

24. College policies, materials and other documents will be assigned a review-by date when created or reviewed, according to the following

materials

criteria:

- Policies: 3 years from creation or last review
- Practice Standards and Guidelines: 5 years from creation or last review
- By-laws: 3 years from creation or last review
- Strategic Plan: new strategic plans are released every 4 years

25. It is the responsibility of staff and the relevant Committee to determine and prioritize a portfolio-specific review schedule, which will be based in part on the review-by date of a given material and partly based on any risk associated with the material's being out-of-date.

26. Staff in each portfolio are responsible for the identification of potential or emergent trends, changes and issues, which may be identified through the following channels (or other sources):

- Changes to Registration best practices, legislation and/or regulations, including trends observed in examination eligibility or results
- Changes to Financial best practices, legislation and/or regulations, which may include changes in how information is collected, stored and used
- Changes to Communications best practices, legislation, regulations and/or developing trends (such as new technology or modes of communication)
- Changes to Quality Assurance/the Professional Practice environment, including practice trends or issues observed through Quality Assurance program participation, as well as legislation and regulatory changes that may affect the practice environment
- Observed or identified trends in Professional Conduct (Discipline, Fitness to Practice) matters that may come to the College's attention.

27. Staff responsible for each portfolio may provide update(s) to Council, Committee and/or the Registrar (based on established review-by date associated with any given material), specifying:

- Which, if any, currently existing materials may require review/revision/removal
- Whether (and why) development or creation of a new policy or other document is required

28. Updates to Council regarding material creation or review may be

presented in one or more of the following forms:

- Included in Committee reports to Council
- Included in the Registrar's report to Council (if not covered by a Committee report)
- Included as a separate Council agenda item (where required)
- Any other form or manner that may be required under the circumstances

Note re: Accessibility, Equity, Diversity, Inclusion and anti-Bias

29. The College of Kinesiologists is committed to the principles of accessibility, reasonable accommodation, equity, diversity, inclusion and anti-bias (EDI-B). An EDI-B lens (which may include an Equity Impact Assessment) will be applied to all materials developed and published by the College.

Note:

As per the By-Laws of the College of Kinesiologists, the following definitions apply:

- 1.05: Calculating Time: A reference to the number of days between two events means calendar days and excludes the day on which the first event happens and includes the day on which the second event happens.
- 1.06: Holidays: A time limit that would otherwise expire on a holiday or a weekend is extended to include the next day that is not a holiday or a weekend.

Attachments:

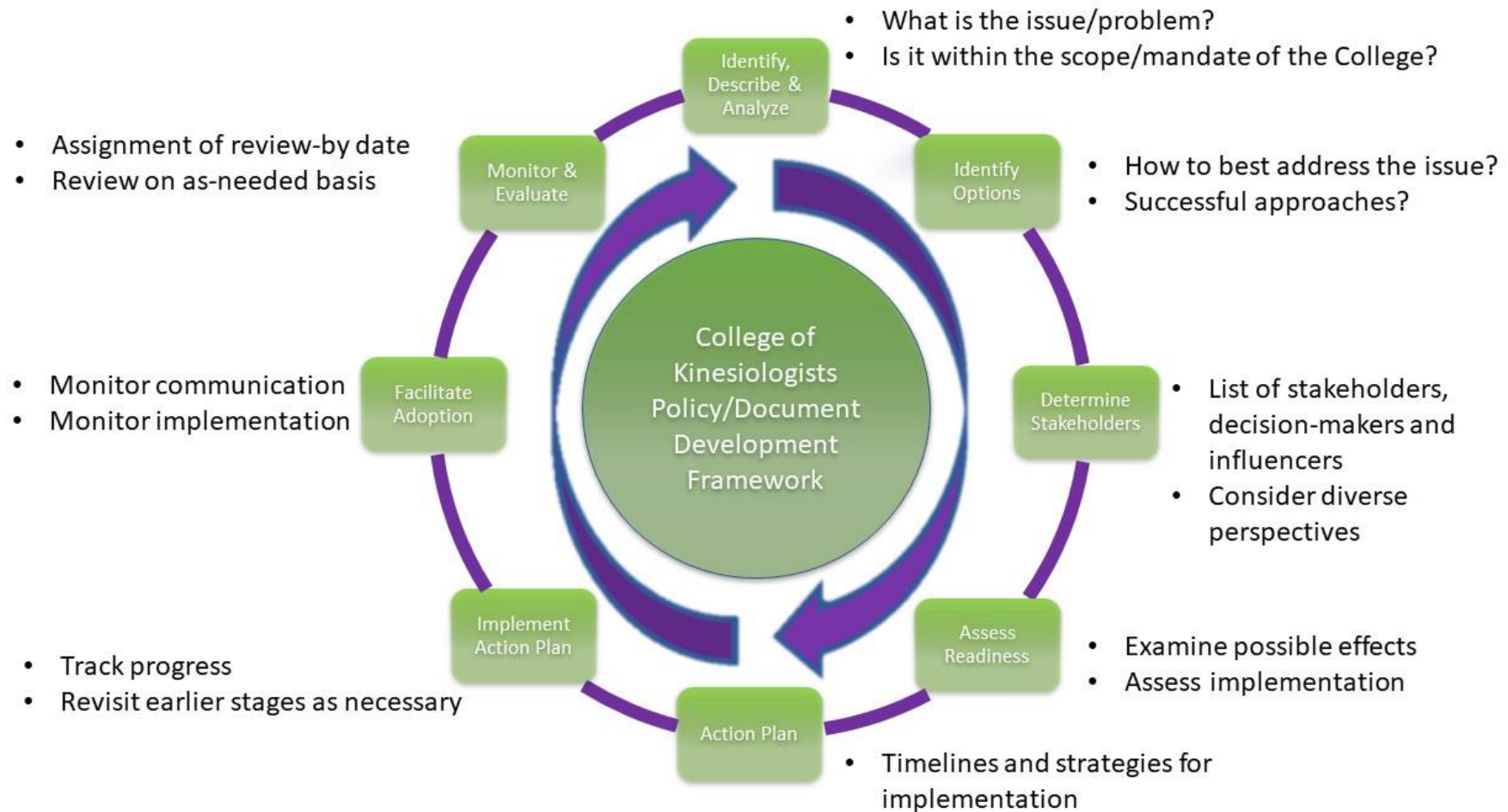
- APPENDIX A: Development and Review Cycle
- APPENDIX B: Types of Materials and their Applications
- APPENDIX C: Material Creation and Review Action Plan (Template)
- APPENDIX D: Material Creation and Review Tracker (Template)
- APPENDIX E: Document Management Tracker (Template)

Acknowledgement

The College thanks and acknowledges the review and feedback provided by staff of the College of Nurses of Ontario, the College of Optometrists of Ontario and the College of Dietitians of Ontario.

The College thanks and acknowledges the College of Respiratory Therapists of Ontario for their permission to adapt and incorporate their framework and supporting information into this Framework.

Appendix A: Framework Review Cycle



Appendix B: Types of Materials and Their Applications

Material Type	Purpose	Enforceability	Ownership/Accountability
By-Law	To establish and describe the rules by which the College operates.	Compliance is mandatory.	Council approval required, may be reviewed by appropriate Committee.
Policy	Directs College activities and functions based on legislation and regulation.	Required. Exceptions and exemptions typically clearly indicated in a given policy (or a policy is created to codify specific exemptions to another policy).	Council approval required, may be reviewed by relevant Committee(s) depending on the specific policy
Essential Competencies of Practice	Define the knowledge, skill, judgement and attitudes required for kinesiologists to practise in the public interest. Serve as the basis for Practice Standards and Guidelines.	May be applied as a benchmark to measure and assess or evaluate performance. May also be used to inform College (Committee, staff) decision-making, as well as practice advice provided to members.	Council approval, review by Registration Committee and other Committee/working group(s) as required.
Code of Ethics	Defines how kinesiologists should uphold the integrity of the profession, serve the interests of patients/clients and act in a manner that justifies the public trust.	May be applied or considered when required to determine whether professional obligations and/or responsibilities have been maintained.	Council approval
Practice Standard	Outlines the expectations for kinesiologists in order to promote public protection. Inform kinesiologists of their accountabilities. Inform the public what to expect of kinesiologists.	Kinesiologists are accountable for meeting the practice standards. Non-compliance could be considered professional misconduct.	Council approval, may be reviewed by relevant Committee(s), depending on the specific Practice Standard and the specific issue being addressed.
Practice Guideline	Support safe and ethical decision-making by kinesiologists by helping them to understand their responsibilities.	Compliance is considered best practice and is expected, could be used as a benchmark against which a kinesiologist's performance is assessed	Council approval, may be reviewed by relevant Committee(s), depending on the specific Practice Standard and the specific issue being addressed.

		or evaluated.	
Article	Material/information provided by the College (via its Standards and Resources webpage) to clarify the College's expectations as set out in Practice Standards. Intended to provide information regarding professional practice.	Intended to inform kinesiologist's practice. Not necessarily intended to be used in assessing conduct, knowledge, skill or judgement.	College staff.
Webinars	Pre-recorded videos available on the College's website and social media channel (YouTube). Provides additional details and perspectives regarding to specified Practice Standards and Guidelines. Also includes discussion of commonly-encountered practice questions relating to those Practice Standards and Guidelines.	Intended to inform and guide kinesiologists, not by themselves intended for use in assessment or evaluation of a kinesiologist's knowledge, skills, judgement and/or conduct.	College staff. If development or review may require third-party service provider/vendor, procurement process will require appropriate approvals (may include Committee review and Council approval).
Explainer Videos	Videos (animated) posted to the College's website and social medial (YouTube) channel. Provide overview and summary of selected Practice Standards, Guidelines and Articles.	Intended to inform kinesiologists and the public.	College staff. If development or review may require third-party service provider/vendor, procurement process will require appropriate approvals (may include Committee review and Council approval).
eLearning modules	To promote continuous practice improvement though increased understanding and awareness of particular practice issues and topics. eLearning modules include topic-specific information and practical scenarios, with multiple-choice responses.	All kinesiologists in the general class must complete the College's eLearning modules at least once throughout their registration with the College. Kinesiologists are expected to use their results to inform and guide their self-assessment and individual learning plan(s).	Committee (including review by the Quality Assurance Committee of aggregate eLearning module results) and College staff.
Sample Tools and Checklists and FAQs	Educational and consultative services	Intended to guide and inform kinesiologists	College staff.

	intended to help kinesiologists understand practice standards and how to apply them to their practice.	regarding best practices, practice standards and guidelines. May not be considered strictly enforceable from the perspective of professional conduct.	
Continuing Professional Development directory	<p>A list of courses and other resources to guide kinesiologists in selecting Continuing Professional Development activity.</p> <p>The directory is not intended to be a complete list of all possible professional development options/service providers, nor is inclusion in the list considered an endorsement or approval by the College.</p>	<p>Kinesiologists are required by the College to participate in self-directed continuing professional development.</p> <p>Kinesiologists are not mandated or required to only pursue professional development that is included in the directory.</p>	College staff.

Appendix C: Material Creation and Review Action Plan (Template)

Need/Issue/Problem	Type of Material Required	Owner (Staff)	Research/Environmental Scan To Include:	Stakeholders/Influencers	Effects: Effectiveness? Unintended Effects? Equity Impact?	Implementation: Cost? Feasibility? Acceptability?

Appendix D: Material Creation and Review Tracker (Template)

Material Name	Owner (Portfolio)	Project Start Date	Research Completed Date	Committee Review Date	Council Initial Review Date	External Consultation Date Range	Approved by Council (date)?

Appendix E: Document Management Tracker (Template)

Document Name	Document Type	Related Documents	Approval/Revision Date(s)	Next Revision Date	Owner (Portfolio)	Owner (Committee)	Council Review Required?