

## 2008 Jurisprudence Knowledge and Assessment Evaluation Results:

A comprehensive report on the evaluation of the 2008 administration of the *Jurisprudence Knowledge and Assessment Tool* can be found on the College's website at [www.cdo.on.ca](http://www.cdo.on.ca). We invite all members to view these important findings. Here are some highlights.

2181 members were required to complete the JKAT in 2008. 2051 (94%) members completed the JKAT in 2008 and the rest were deferred to 2009 for various reasons. Of the members who completed the JKAT, 1008 (49%) completed the JKAT evaluation.

Members who completed the evaluation proportionately represented the areas of practice and work settings of the general membership. This, coupled with the 49% response rate, allows CDO to rely on the results of this evaluation.

### Results:

**Table 1**

#### Areas of Practice of members who completed the evaluation

| Answer Options                                       | Response Percent | Response Count |
|--|------------------|----------------|
| Clinical nutrition or one-on-one client intervention | 67.1%            | 676            |
| Food and nutrition management                        | 8.0%             | 81             |
| Sales, Communication & Marketing                     | 5.0%             | 50             |
| Policy Development & Program Planning                | 13.8%            | 139            |
| Clinical Nutrition Management                        | 6.1%             | 61             |
| Education & Research                                 | 14.1%            | 142            |
| Other (please specify)*                              | 14.8%            | 149            |
| <i>answered question</i>                             |                  | <b>1008</b>    |

\*(See Appendix A for areas of practice identified by members who selected other)

**Table 2**

#### Primary Practice Settings of members who completed the evaluation

| Answer Options                                      | Response Percent | Response Count |
|---|------------------|----------------|
| Business and industry                               | 5.7%             | 57             |
| Hospital or other care facility                     | 46.1%            | 465            |
| Home Care (CCAC case management or in-home service) | 4.1%             | 41             |
| Community Health Centre/Health Service Organization | 6.3%             | 63             |
| Long term care home                                 | 11.2%            | 113            |
| Family Health Team or Family Health Network         | 4.7%             | 47             |
| Education Institution                               | 4.5%             | 45             |
| Diabetes Education Centre                           | 10.0%            | 101            |

|                                   |       |     |
|-----------------------------------|-------|-----|
| Private Practice – (Primary Care) | 6.7%  | 68  |
| Public Health Unit                | 11.2% | 113 |
| Government                        | 3.5%  | 35  |
| Other                             | 1.9%  | 19  |
| Other (please specify)*           | 6.1%  | 61  |

\*(See Appendix B for practice settings identified by members who selected “other”)

**Table 3**  
**Member’s perception of change in knowledge about laws, standards and guidelines as a result of completing the JKAT**

| Answer Options             | Response Percent | Response Count |
|----------------------------|------------------|----------------|
| 1 - Not improved           | 0.5%             | 5              |
| 2 - Improved somewhat      | 15.0%            | 151            |
| 3 - Stayed the same        | 3.1%             | 31             |
| 4 - Improved               | 62.6%            | 630            |
| 5 - Improved significantly | 18.9%            | 190            |
| <i>answered question</i>   |                  | <b>1007</b>    |

**Table 4:**  
**Members who reported making change to their practice or their intention to make changes to practice as a result of completing the JKAT**

| Answer Options           | Response Percent | Response Count |
|--------------------------|------------------|----------------|
| Yes                      | 66.9%            | 672            |
| No                       | 33.1%            | 333            |
| <i>answered question</i> |                  | <b>1005</b>    |

**Table 5:**  
**Members report of changes or planned changes were related to:**

| Answer Options  | Response Percent | Response Count |
|---|------------------|----------------|
| Professional Obligations <sup>1</sup>                                       | 23.6%            | 236            |
| Requirements under the Regulated Health Professions Act (RHPA) <sup>2</sup> | 16.6%            | 166            |
| Privacy and Confidentiality <sup>3</sup>                                    | 31.2%            | 312            |

<sup>1</sup> Obligations related to the Code of Ethics, role as an advocate, use of the RD title, scope of practice, responsibility to: clients, society and the profession; and CDO Quality Assurance obligations.

<sup>2</sup> Duty to warn, college complaints process, RHPA mandatory reporting requirements and cooperating with the College

|                                    |       |            |
|------------------------------------|-------|------------|
| Conflicts of Interest <sup>4</sup> | 13.3% | 133        |
| Boundary Issues <sup>5</sup>       | 13.7% | 137        |
| Scope of Practice <sup>6</sup>     | 18.5% | 185        |
| Consent to Treatment <sup>7</sup>  | 20.4% | 204        |
| Record Keeping <sup>8</sup>        | 37.0% | 370        |
| I do not plan to make changes      | 27.5% | 275        |
| <i>answered question</i>           |       | <b>999</b> |

**Table 6:**  
**Members' perception that their knowledge about laws, standards and guidelines will have an impact on their practice and or clients.**

| Answer Options           | Response Percent | Response Count |
|--------------------------|------------------|----------------|
| 1 - Disagree             | 2.0%             | 20             |
| 2 - Somewhat Disagree    | 1.7%             | 17             |
| 3 - Neutral              | 29.8%            | 296            |
| 4 - Agree                | 59.4%            | 590            |
| 5 - Strongly Agree       | 7.1%             | 71             |
| <i>answered question</i> |                  | <b>994</b>     |

**Qualitative comments related to results reported in Table 6.**

Members provided 214 qualitative comments (Appendix C) on how the learning they experienced would impact their clients. Most of the comments related to an increased awareness and knowledge about the laws, guidelines and standards affecting practice rather than reporting on actual impact on clients. A few dietitians suggested that this was more or less a refresher for them, while others felt that their increased awareness and

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<sup>3</sup> The lock box provision, health information custodian responsibility, need for privacy policy, handling complaints regarding breach of obligations under the privacy legislation, access to health records, consent to access health records including role of substitutes for access to health records, circle of care concept, permission to use of health information for purposes other than health care, role of privacy commissioner, correction of records and disclosure requirements when there is a breach.

<sup>4</sup> Conflict of interest, avoiding conflicts and managing conflicts.

<sup>5</sup> Boundary crossing, avoiding boundary crossings and managing boundary crossings

<sup>6</sup> Harm clause under the RHPA, controlled acts, exception to controlled acts, orders, directives, delegations and competence

<sup>7</sup> Consent, implied consent, substitute decision maker, preferred substitute decision maker list.

<sup>8</sup> What records need to be kept, content, for how long, destruction of records, confidentiality of records, what to do with records when you retire, keeping records outside of official chart/file,

knowledge would ensure that their actions protect clients and self. A few comments suggested increased confidence with respect to decisions and respect for their position as Registered Dietitians.

Most of the action oriented comments were related to documentation and consent, for example, documenting information related to patients Power of Attorney and family member’s wishes. Members reported that they would obtain consent and documenting consent more. Securing patient information and increasing diligence about confidentiality were also reported frequently.

Setting appropriate boundaries to protect and respect patients and the Registered Dietitian by not taking on an unrealistic case load was noted as one way learning would impact work and clients. Some RDs noted that they would review existing policies, advocate for new policies such as those related to confidentiality of records and privacy for their clients.

**Table 7**  
**Members’ perception that completing the JKAT was of value to them.**

| <b>Answer Options</b> | <b>Response Percent</b>  | <b>Response Count</b> |
|-----------------------|--------------------------|-----------------------|
| 1 - Disagree          | 1.6%                     | 16                    |
| 2 - Somewhat Disagree | 2.8%                     | 28                    |
| 3 - Neutral           | 14.4%                    | 143                   |
| 4 - Agree             | 65.7%                    | 652                   |
| 5 - Strongly Agree    | 15.4%                    | 153                   |
|                       | <i>answered question</i> | <b>992</b>            |

**Qualitative comments related to the results reported in table 7.**

Members provided 159 qualitative comments (Appendix D) about the value of completing the JKAT. While most of the comments described value that were in line with the comments they made about how the learning would impact their practice and clients (see previous section), some members noted that the value was limited because of their unique and non-traditional area of practice. Others felt that it was more or less a refresher as they had already read the Jurisprudence Handbook and or done the College’s Stage One Practice Assessment.

**Table 8:**  
**Members’ perception that CDO supports them in my learning about laws, standards, guidelines and ethical principles related to the profession.**

| <b>Answer Options</b> | <b>Response Percent</b> | <b>Response Count</b> |
|-----------------------|-------------------------|-----------------------|
| 1 - Disagree          | 0.7%                    | 7                     |
| 2 - Somewhat Disagree | 0.9%                    | 9                     |

|                          |       |            |
|--------------------------|-------|------------|
| 3 - Neutral              | 11.1% | 110        |
| 4 - Agree                | 70.6% | 699        |
| 5 - Strongly Agree       | 16.7% | 165        |
| <i>answered question</i> |       | <b>990</b> |

Members provided 63 qualitative comments (Appendix E) under the general comments section. Most pertained to the nature of the questions and or the assessment content and process such as:

- too many questions about sexual abuse
- appreciated forced review of laws and a deeper understanding versus just reading in theory
- aware of references and where to find information
- time consuming assessment
- no computer at home
- links did not work
- Appreciated discussion with other RDs.
- frequency of assessment (some wanted it increased to once every 3 years while others wanted the frequency decreased)
- quality of questions
- Having to rewrite the whole test when you only got a few questions wrong.

## Appendices

### Appendix A

#### Area of Practice

| <b>Other (please specify)</b>                            |
|--|
| government research - Canadian Nutrient File             |
| Community nutrition                                      |
| Program evaluation                                       |
| Healthy eating presentations                             |
| public health  |
| public health  |
| public health  |
| Government   |
| Elementary School teacher                                |
| Health Promotion and Disease Prevention in Public Health |
| Public Health  |
| Government, Regulatory                                   |
| management in public health                              |
| Executive leadership for a not for profit organization   |
| Public Health  |
| public health  |
| health promotion programming/facilitation                |

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|--|
| Health Promotion - Nutrition Programs  |
| public health  |
| community and/or public health nutrition   |
| CCAC Management  |
| Communications and one-on-one client intervention  |
| work for EatRight Ontario, telephone nutrition counseling  |
| Community  |
| consulting, nutrition communications   |
| Clinical research in another field   |
| geriatric nutrition long term care   |
| public health  |
| Diabetes Education   |
| Public Health Nutrition  |
| Was involved in policy development and regulations, program planning but no longer at this time. |
| pharmaceutical sales   |
| EatRight Ontario nutrition service   |
| Nutritional Care in Long term Care   |
| Public health - chronic disease and injury prevention management                                 |
| Group workshops, in-services, teaching nutrition in schools                                      |
| Research Only  |
| author of books for people with type 2 diabetes  |
| Community Prevention and Education   |
| normal nutrition   |
| Not presently employed   |
| currently not working...stay at home mother  |
| public health, CPNP clinical (25% FTE)   |
| also includes diabetes education clinic  |
| community nutrition...groups, health promo and chronic disease prevention                        |
| Cookbook author  |
| counseling   |
| Long term Care   |
| Administration of a Business Partnership providing RD services to LTC Homes                      |
| public health promotion  |
| Food Service Software Systems and Quality Mgmt for a Food Svc Mgmt Company                       |
| Not practicing at present  |
| Maintain nutrition service computer system and database  |
| federal government   |
| group teaching as well   |
| Formerly Education/Research - now retired  |
| public health  |
| Public Health  |
| Health promotion and prevention  |
| Nutrition Education of Public via Group Format-Primary Prevention                                |
| Aboriginal/ Diabetes   |
| program planning and implementation  |
| public health nutrition promotion  |
| Group facilitation   |

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| public health   |
| manufacturing   |
| Nutrition marketing   |
| long term care  |
| maternity leave right now                                       |
| public health   |
| Health Promotion  |
| Diabetes Educator CDE   |
| Public Health   |
| management of non-nutritional areas                             |
| Long Term Care  |
| nutrition communication, Product information support            |
| Public health   |
| advocacy for food insecurity                                    |
| health promotion  |
| community programs and group education                          |
| Public Health - School Nutrition                                |
| HEALTHCARE CONSULTING   |
| Community - group counseling, food security                     |
| Community nutrition and group work                              |
| Public Health (education, program planning and delivery, etc.)  |
| group education   |
| Association Management  |
| Food Services Administration                                    |
| consulting dietitian in long term care                          |
| Group Education   |
| currently not working   |
| trade association - work on regulatory and public policy issues |
| Local government policy   |
| government  |
| Professional practice leader                                    |
| health and regeneration consultant in England (own business)    |
| Skill building, education                                       |
| Health promotion  |
| Recently started a position in this area                        |
| nutrition research, writing, consulting                         |
| public health nutrition   |
| public health   |
| nutrition consultant - varied public health                     |
| Not currently working - home with young children                |
| Pharmaceuticals   |
| Public Health   |
| Executive Management in a Long Term Care Facility               |
| public health/health promotion                                  |
| call centre   |
| pt care - cr care   |
| private practice  |

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| Manager of Chronic Disease programs                        |
| education - secondary                                      |
| Health Promotion   |
| I don't work in the field. I am an auditor for the police. |
| Health care consulting                                     |
| consulting in food composition and computer applications   |
| strategy and program planning in a health organization     |
| LTC  |
| Pharmaceutical Sales representative                        |
| community front line education                             |
| Electronic health record development and support           |
| Community Nutrition  |
| community and population health                            |
| Clinical/community   |
| community nutrition  |
| Administration   |
| Public Health Nutrition                                    |
| Management within Public Health                            |
| supermarket clinic days                                    |
| Public Health  |
| Dietitian Diabetes Clinician                               |
| regulatory science   |
| Distribution/Logistics, Inventory & Budget Controls        |
| Nutrition Labeling   |
| Public Health  |
| none   |
| Public Health including CPNP                               |
| CPNP program   |
| Public Health -chronic disease prevention/family health    |
| not practicing at the moment                               |
| Public health/client counseling for prenatal clients       |
| Public health  |
| diabetes educator  |
| Nutrition Research and Surveillance                        |
| consultant: writing and speaking                           |
| on leave   |
| COMPUTER AND FOOD SERVICE                                  |
| Private Practice   |

## Appendix B

### Practice Setting

|                                 |
|---------------------------------|
| <b>Other (please specify)</b>   |
| Non profit organizations        |
| Not-for-profit                  |
| health professional association |
| grocery store                   |

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| out patient clinic linked to hospital  |
| Private Practice - Communications  |
| dietitians of Canada   |
| consult mainly for gov't, ngo's  |
| Mental Health Hospital   |
| contract college instructor - food service worker program                                      |
| Nutrition education/counseling by phone  |
| consultant for a non-profit organization   |
| Grocery store/pharmacy   |
| provide telephone nutrition information  |
| home-based   |
| Not presently employed   |
| Early retirement from the hospital   |
| Private Practice Business providing LTC RD Services  |
| N/A  |
| Not for profit funded by government  |
| Retired  |
| Outpatient education re: weight loss   |
| Nutrition Communications   |
| recreational centre  |
| charity  |
| NGO  |
| Workplace  |
| non-profit public health association   |
| Research   |
| Family Health Group  |
| NON-DIETETIC CONSULTING TO COMMUNITY LONG-TERM CARE  |
| HIV clinic & Mental Health facility  |
| Churches   |
| NGO  |
| none   |
| trade association representing food manufacturers - interact with federal government routinely |
| Diabetes Research  |
| Government operated long term care facility for developmentally disabled clients               |
| physician's office   |
| Grocery store  |
| voluntary sector, regeneration programs and local government                                   |
| teaching in schools, for companies   |
| grocery store  |
| self employed home office  |
| consultant   |
| Retired  |
| contract food service & hospitality management   |
| Not currently working - home with young children   |
| Call centre  |
| University   |
| private practice serving publishers, health promotion agencies                                 |

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| NGO   |
| ministry funded community nutrition program           |
| international humanitarian organization               |
| Internship Coordinator - both hospital and university |
| Health information technology                         |
| Non-profit Organization                               |
| Own office in a Ramada Hotel                          |
| consultant  |
| on leave  |
| private practice in fitness centre                    |

## Appendix C

### Qualitative Comments on how learning will impact work or clients

214 comments received

| Response Text  |
|--|
| I maintain a database for Health Canada and have no clients - none of this has any impact on my job.   |
| I'm not working with clients directly in my current position.  |
| Improved emphasis in teaching interns  |
| My clinical practice, that is nutrition related care, has not directly changed since completing the JKAT. However my knowledge about the law and guidelines has improved my daily activities as a RD for example dissemination of patient information between health care professionals. |
| Improve Pt care through advanced directives  |
| more cognizant of legal issues related to practice   |
| By having a stronger understanding of the laws and standards regarding dietetic practice will allow me to keep better client records.  |
| - better able to describe/inform people of their privacy rights AND duty to report (and feel comfortable doing so)   |
| - duty to report other health care professional when applicable  |
| I will be more diligent regarding communications with POA or resident regarding changes to their diet or meal plans  |
| I will be more conscientious of decisions I made at my work. I will check the jurisprudence guidelines more often.   |
| I feel their privacy and rights will be more protected.  |
| Better capacity to respond within the regulations and acts of the college and RHPA   |
| Documentation policies will reflect laws   |
| It will likely delay assessments in order to get appropriate consent and chart adequately  |
| When the need arises to apply a specific law, I will remember the kinds of scenarios from the JKAT and more confidently make the application. Great to see all the resources for guiding with the applications.  |
| I find that I use the knowledge I gained to write the JKAT I refer to daily in my practice.  |
| It may not impact directly on my practise of in hospital patients as I was familiar with the regulations prior to doing the tool however it broaden my awareness of the appropriate route of reporting misconduct/suspected child abuse  |
| I do not work directly with clients. However, I have increased my knowledge in considerations if I ever do work with clients.  |
| By updating my record keeping (ensuring I have up-to- date assessment guidelines for charting by exception) I will be able to follow best practice guidelines for my clients.  |
| Best possible care   |
| Has limited direct application in the industry/business setting.   |
| Better understanding about what my boundaries and what I can and cannot do. I liked the scenarios given on the   |

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| test.   |
| observe client more for their rights and concerns   |
| JKAT 2008 Evaluation is a good refresher. Helps me to provide efficient service in a timely manner.   |
| Question 5: "I do not plan to make changes" should really read "to date; I have not made any changes". I cannot foresee if I will make changes, as it could be a possibility that unplanned changes may take place.   |
| already had a good knowledge of laws, standards etc.  |
| It will make me better prepared to handle situations as they occur because I will have the knowledge needed to respond to different situations.   |
| More knowledgeable however I do not see any direct impact   |
| My knowledge about the laws, standards and guidelines will impact my practice/clients but I was already incorporating these into my practice before the JKAT.   |
| I think the JKAT has helped me to improve my communication skills with patients and the medical team, for instance, when discussing possibility of G-tube insertion. I have found that since the JKAT, I'm more confident in my role for liaising with the medical team, patient, and family (if appropriate) when they are trying to decide the appropriateness of this medical treatment for a patient. |
| I understand my scope of practice, competency, power of attorney better and therefore am able to discuss these issues with confidence.  |
| Physician directives  |
| I will be more aware of my professional obligations to my clients. I will keep more accurate records.   |
| JKAT reinforced what I was already doing and served to enhance what I was doing already or as a great reminder to continue doing certain things. A good example is food security in a rural area where I have visibility in the community and run into many people I know outside of work all the time; so I am more conscientious of checking my boundaries.   |
| Better informed   |
| Although I found the JKAT informative, it will not change how I do business within the Sales/Marketing segment.   |
| Ensuring filing cabinets are locked protects clients  |
| I do not currently practice dietetics, but the JKAT provided good information specific to RD practice that I may use someday. Ethics and privacy legislation are integral components of my current job in research, so I will continue to perform my job with the knowledge I have already acquired in this area.   |
| More efficiency and completeness of care.   |
| I may stop seeing clients privately due to the legal obligations on record keeping ,privacy and confidentiality   |
| Increased level of awareness of issues in day to day duties.  |
| I will ensure that I obtain consent from my clients   |
| before I weigh them or take their waist circumference measurement.  |
| I was following the laws before and will continue to do so.   |
| I will be more conscientious re: phone messages/privacy. i.e. calling client's homes to book app'ts.  |
| Improvement in my practice ethics will benefit me and my clients both   |
| I am even more aware than previously of the requirements.   |
| Increased awareness and attention to boundary issues will help me to maintain professionalism and recognize if clients are relying on me more than necessary or are appropriate. The JKAT helped in also clarifying best practices for confidentiality, security and good record keeping.   |
| I believe I was aware of most laws that govern our profession, enough not to break them but now have a better understanding to applying increased knowledge.  |
| Continued quality of care in spite of heavy workload.   |
| Please add "on" after impact in the above sentence.   |
| The refresher has given me a renewed interest in sharing my knowledge with other Dietitians and students.   |

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| No Immediate impact but probably will in the future if I decide to have my own private practice   |
| Being more careful with "gray" areas.   |
| I use this information in my role and had already developed this knowledge base   |
| I'll apply the learning in obtaining informed consent and in keeping better records.  |
| Increased knowledge, skills and awareness of the importance, adherence, applications and implications of the laws, standards and guidelines.  |
| Application of laws and standards.  |
| More complete follow up will be done  |
| Increased awareness/knowledge and application will make clients "safer" and provide service based on the guidelines   |
| As a manager of dietitians I found the areas of the JKAT that reviewed the manager's "obligations" and requirements under the RHPA to be helpful and added to my knowledge and will help me improve my managerial skills.   |
| ensure appropriate consent is given   |
| assess patient's capability of giving an informed consent   |
| It is more of an "awareness" of the laws, standards and guidelines, as I work with clients. In addition to feeling more confident in the things I can and can't do. It helped to clarify some things.   |
| I will be able to better protect client with better knowledge of the privacy legislation. I have changed my charting practice to eliminate double charting.   |
| the work I do does not really impact anyone - NA  |
| If I ever do fully begin a private practice, I will be better prepared to organize myself within the required guidelines  |
| I have already accepted and mentored six students   |
| since I completed JKAT and focused on professional obligation, record keeping and scope of practice, which were areas I needed to improve my knowledge.   |
| Awareness of the Client rights and also where the alternate decision maker becomes involved.  |
| Assist with my rights as a dietitian and push for appropriate settings regarding confidentiality and related issues.  |
| The JKAT helped improve my awareness of the law and what is expected of me as a professional.   |
| I have only been in my position for a year and at this time, have very little involvement with the dietetics side of practice (other than peripherally). Should my position become more active in dietetics practice, my practice would change and my knowledge would impact my practice and clients. My clients utilize me for my software and project planning knowledge at this time, not nutrition. |
| Improve charting in a timelier manner as an effort is made to see patients sooner. Reassurance that quality is very important verses quantity. If all the nutritional goals have not been met before the client is discharge then follow up in the community is recommended.  |
| eye opening to some of the details of certain legislation   |
| greater privacy and confidentiality   |
| more formal consents to treatment   |
| When I encountered a pt who wasn't eating, I use to go out of my way to purchase something special from the cafeteria to encourage them to eat - I know realize this is crossing a boundary between client and dietitian.   |
| Take more care in handling personal information provided by the clients & ensure it is used only for the purposes it was collected.   |
| Improved knowledge about legality and client confidentiality.   |
| more cognizant of the impact that practice has on the client  |
| do not see clients but if I did would impact on my learning's   |
| Making sure any liability is minimized and difficult situations handled effectively.  |

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| My practice in the areas mentioned in question #5 will be evidenced based not solely reliant on past practice.   |
| Increased awareness of RHPA responsibilities   |
| I have a better understanding of my legal obligations related to record keeping  |
| Clients will now be more explicitly asked for consent prior to treatment.  |
| they will ensure fair, and professional practice plus privacy  |
| better understanding about consent   |
| Made me more aware of the rules and regulations governing practice and client interaction.   |
| In the way I approach clients/families and the information I use.  |
| I will continue to give very close thought to cover all aspects of Laws, Standards, Guidelines as I practice   |
| I think overall I had a "gut" feeling of my obligation to my patient without knowing the exact legal term or implication. What the tool did was reinforce what I was already doing and will help to back me up when advocating for my patients   |
| Boundary issues are something I recognize I need to work on. Living in a small community makes this a challenge. Gaining consent/confirmation by clients also an area I am focused on.   |
| I have improved my knowledge but this information has little impact on my practice.  |
| Will reinforce these in my work with graduate students   |
| I have a greater understanding of which legislative pieces apply directly to the records and type of communication that I need to maintain.  |
| will be sure to document consent to treatment, if resident can not consent will be sure to get formal agreement from POA, always got the agreement in the past but was not as careful about explicit documentation of consent  |
| Ensure the patient is involved in and is aware of the care they are receiving and why.   |
| It will most impact my work in terms of increased charting and will not likely affect client care.   |
| I have not come into contact with cases yet where the JKAT testing was required. I have used the information needed in the past to keep records. I was already aware of the need to report abuse issues. I will utilize and be more aware of the other areas that my learning has afforded me if/when the need arises. |
| communication between professionals as part of the circle of care  |
| It will enhance the professionalism of my practice   |
| N/A - I already had familiarity with topics covered and am applying them already in my practice. I strive to maintain current knowledge and competency in my practice - the JKAT reinforced this for me.   |
| I believe it is imperative to remain current about all laws, standards and guidelines so that we can ensure competent, safe care to our clients.   |
| Although the version I took was geared to people in settings other than clinical, there were still a number of client-related questions.   |
| Maintaining boundary issues with patients  |
| My learning will impact my clients positively by the knowledge I gained in terms that might be privy to their medical files and improved confidentiality thus building more trust with clients.  |
| I will be more aware of the issues around the items listed in Q5 and will ensure my patient's rights and interests are protected   |
| no change  |
| I am very careful not to establish any relationship with a client that could be described as personal  |
| I'm now more anxious with patients. I worry about small things I may say or do. I have always follow rules using common sense and have always asked for written consent. Perhaps this will become less in future.  |
| privacy laws   |
| My clients are businesses so that confidentiality surrounding health info does not apply. my practice has already incorporate laws standards and guidelines associated with being an RD.   |
| The experience raised my level of knowledge about the laws and their origin and just elevated my awareness   |
| More discussions of confidentiality with clients; reassure clients.  |

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| more specific, detailed documentation   |
| Continue to try to improve timely charting for nutritional intervention.  |
| Just changed to a management position.  |
| Need to apply the laws to management of dietetic staff  |
| I learnt about the record keeping practices.  |
| more aware of issues wrt dealing with outpatients and sharing info with other professionals   |
| More thorough documentation/charting  |
| I am more aware and sensitive of the laws and how they may impact my practice and clients. I reflect and question more on situation. I feel I could respond in more detail if this survey was administered following the JKAT.  |
| A better understanding of the laws, standards and guidelines is always beneficial and allows do my job competently.   |
| JKAT heightened the importance of confidentiality and space/rooms are requested in order to speak with the client privately when requests or referrals are deemed "urgent" by the consultants (often the physicians). This is just one example of many.                           |
| Parameters for assessments performed are more defined   |
| better dietitian work within laws for the protection of the client  |
| more aware of the legal implications  |
| Increased knowledge and awareness of standards, etc will ensure ongoing competency and professionalism  |
| By being more knowledgeable about the laws I can better address certain issues with clients and work efficiently with other team members.   |
| It will be improved, and I needed to be made more aware of these issues.  |
| Better documentation, how to manage high workload, better understanding of consent and conflict of interest.  |
| Understand consent and circle of care.  |
| Chance to review and read for the first time laws and regulations of the practice.  |
| Information will be used in the organization and training of dietetic interns   |
| Many of the laws, standards and guidelines previously were something in a book that I would get to when required; the JKAT brought them into the fore front, refreshing their importance. I will know now more specifically where to refer to when presented with a situation.    |
| <b>MORE CAUTIOUS ABOUT SHARING INFORMATION WITHOUT CONSENT</b>  |
| alerting students to requirements   |
| I learned the theory, but was already practicing in accordance to the theory and thus do not feel my practice will change significantly.  |
| I will enforce with my employer the need to carefully protect client confidentiality with better safeguarding i.e. request encoded information that is contained on laptops.  |
| A better understanding of the scope of privacy legislation.   |
| I was NEVER able to find out what questions I got wrong. How can I make changes? I have tried to contact the College twice by e-mail, to find out how I can find out what questions I got wrong, so that I can review the information and MAKE appropriate changes to my practice |
| Provide better patient care.  |
| I will discuss more changes in diet with POA and resident due to swallowing and texture changes   |
| I am much aware now with the standards and requirements of my professions. I learned how to handle my clients by providing services w/in my professional scope of practice. Most especially I learned the procedures what to do now when I retire from my career later.           |
| Having a better understanding of the laws, standards and guidelines will be beneficial in any situation in my practice. Understanding the laws, standards, guidelines can play a part in everyday decision making.  |

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| My knowledge and application has been renewed and sharpened. There were no major/alarming gaps. Rather, it was a worthwhile, thought provoking journey to review the specific information and processes that have been thoughtfully prepared and are readily accessible to protect the consumer and affirm professional practice standards.  |
| There will improved effectiveness and efficiency in my practice regarding the services provided.   |
| This information is crucial foundational knowledge!  |
| I do not work in Canada but it has influenced my thinning about my work here in the UK   |
| Teaching students  |
| improved security regarding pt files/information   |
| The learning supports all the work I have done and followed with respect to the College of Nurses, College of Occupational Therapists, and College of Dental Hygienists - so they all interconnect and most of the topic/ issues (Professional Boundaries, Confidentiality, Records) are the same - so it is helpful to be well grounded and knowledgeable about one's own laws, standards and guidelines.   |
| more respect for boundaries  |
| It will help protect my clients and myself. I am more aware of my own limitations and I am much more comfortable saying no to unreasonable requests which then protects the client as well.  |
| privacy information  |
| Retired  |
| Not currently working so no impact right now, however, may impact my work if I go back to dietetics in the future.   |
| It will impact my practice, as I will just be more diligent in record keeping and making sure records are secure.  |
| I don't think I learned anything that will really change or have an impact on my practice or clients.  |
| My learning was more about where to access information I may need.   |
| I will be more precise, less ambiguous and confirm learning.   |
| I will be more aware of a client's ability to make decisions and the next step to take if they are not able to make decisions.   |
| I have enjoyed the opportunity to review and improve my knowledge. It reinforces my current practice and demonstrates that no matter what business you are in, the same ethical, quality and risk issues are coming up in all lines of professional work.  |
| Although I learned a lot about standards and guidelines, there was nothing in my practice that needed to be changed in relation to these. It has increased my awareness, though, of why things are set up the way they are. It has also made me aware that I need to ask questions about these things if I am not sure.  |
| Ensures safe and competent practice  |
| I will advocate for mentorship in my work place  |
| The nature of my work is such that it will not be impacted.  |
| I am more diligent about patient confidentiality and   |
| receiving consent before treatment.  |
| I already had a really good handle on this before the JKAT, but legislation always will have an impact on clients  |
| review policies and procedures to ensure they conform to law, standard and guidelines  |
| The standards and guidelines in JKAT are strongly related to clinical and patient/client care. Business and industry requires knowledge, understanding and application of laws, standards and guidelines pertaining to communication, business ethics, expense reporting, financial ethics, ingredient control, quality and manufacturing control (for food and promotional items), food and drug acts and regulations, consumer packaging and labeling acts and regulations and other relevant regulations. |
| Helps me to understand all the roles and regs that impact on practice.   |
| The JKAT was a refresher for me and helped to just reinforce what I already knew. The JKAT made me more aware of what I was doing and made me question some things and make sure that I was following all the rules and guidelines. It helped to keep the issues in the forefront of my thinking and practice.   |

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| As I am a member of Certified Management Accountants and Certified Internal Auditors, I am required to maintain similar standards and work within guidelines and laws. These organizations have similar jurisprudence practices in their fields of service.   |
| When I return from my mat leave, I will talk with my manager about our policies regarding consent to release information with other health care providers.  |
| I have a much better foundation on the legal guidelines under which a dietitian must practice and situations in which I must report information. This will allow me more confidence in my practice, by being comfortable to practice within set boundaries.   |
| Always good to refresh knowledge of professional boundaries and expectations.   |
| I will be more cautious of how much personal information I disclose to my clients.  |
| I will have more confidence that I am practicing within the laws and standards  |
| The knowledge gained will be particularly useful to me when I return to client nutrition counseling   |
| more cognizant of the standards and guidelines will help me avoid potential problems and issues   |
| Ensuring that the college requirements can be met by the electronic health record. Optimizing the build of the record so that others will have confidence that it meets the requirements as defined by the regulated health professions of Ontario.   |
| I am much more aware of my obligations  |
| The language I use if and when I need to explain the standards and guidelines will be different. In some instances it will become less precise and more general (guidelines) while in other areas it will become more specific (it is the law /your right to...).   |
| Improving my understanding of my client's rights allows me to do my work and protect them at the same time.   |
| I'm not sure the public really recognizes our role and thus will make no difference to them. For me, my learning from JKAT is very important because now I know how to protect clients and myself.  |
| None  |
| Currently my work involves program planning and technical support for international nutrition projects, and I did not find that any changes to my work were needed resulting from my learning from JKAT. However reflecting on previous employment settings and potential future work options I can see many ways to apply this learning.         |
| Aware of the guidelines to follow   |
| As an internship Coordinator, I feel very strongly that we need to teach the laws and stds much earlier in Univ and I plan on teaching/training my interns during enhancement seminars via case studies, giving readings of jurisprudence, etc  |
| Improve professionalism at work, improve patient care, and improve transparency of some dept practices.   |
| I will be a more competent RD and, therefore, better serve my clients.  |
| I don't practise dietetics and therefore, my increased knowledge will likely not translate into changes in practice.  |
| Ensure standards at place of work are in keeping with College standards.  |
| Changing the work environment to ensure that there is no allowance for sexual harassment; joking and other sexually related comments among staff that might be considered harassment by others will not be tolerated  |
| Professionalism, competency, effectiveness, efficiency, privacy. confidentiality  |
| How to handle conflict.   |
| Keep up-to-date in dietetics. Continue to improve in counseling and teaching.   |
| I will work with awareness of not doing any harm to my clients and at the same time protect myself against malpractice.   |
| A general understanding of laws, standards and guidelines is important to everyone in our profession. I believe I possessed that general knowledge and understanding prior to completing the JKAT. Understanding how these elements apply and relate to one's current practice setting(s) is another issue. This is highly important to me and my |

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| clients given that I practice in 2-3 different practice settings. The JKAT has underscored, very well, the importance of the latter. I now feel more confident in my understanding and application of the laws, standards and guidelines as these relate to a particular setting/set of clients.   |
| Good way to learn a book I would never had read on my own.   |
| Improved record keeping and a renewed focus on confidentiality issues as well as scope of practice.  |
| Just ensures that you are doing everything required to maintain the highest standard of professionalism.   |
| Better services and protection for my clients and myself.  |
| It is difficult to interpret the legal terminology in some of the documents referenced in the JKAT; a "Cole's notes" version would be helpful.   |
| more client focused  |
| I now get my clients sign a Freedom of Information form. I have changed the locks to my office and clean my own office so custodians do not come in my office due to confidentiality.  |
| It helped me realize that we should only take on a patient load that we are able to fulfill our professional obligations.  |
| My learning assists with my management of the clinical dietitian group at the hospital.  |
| It has already impacted on my work. It allowed questions on circle of care designations to arise and include the dietitian.  |
| Previously sending letters to referring physicians was simply part of my procedure following a patient assessment; I did not always inform patient that I would be writing a letter to their referring doctor. Now, I will ensure that documentation to referring physicians be done so with the patient's knowledge and consent of content. |
| I have a better understanding of where to access information about the laws, standards and guidelines that affect the profession of dietetics.   |
| Professional Relationships are of main importance  |
| continue to work ethically and ensure client privacy   |
| There is absolutely no need for this sort of information in the position I hold with the government. There should be more screening of the information already provided to the college regarding place of practice before this sort of course is made mandatory.   |
| The clients will be informed of their "right" to keep p their confidential information private and requested to sign a consent form if they wish to let that information known to caretakers, family members or other.   |
| I encourage other Health Care professionals to document more often in the charts when dealing with family members & POA's.   |
| Just knowing that we have the 2nd edition JKAT booklet as a resource when uncertain about certain issues is a bonus, I will not hesitate to refer to it.   |
| I will get extra permission to talk with family members and different medical personnel from the client. I will keep better records with extra information than what I was doing. I have a better understanding about boundaries and that will impact my relationship with my clients.   |
| More aware of scope of practice and conflict of interests that may arise.  |

## Appendix D

### Qualitative Comments about value of completing the JKAT

| Response Text   |
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| No use in my job situation  |
| It was an interesting exercise but it does not have a direct impact on my practice.   |
| It was a good learning opportunity however, it did create a lot of anxiety  |
| I like the different case scenarios some of which were applicable to my area of practice.   |
| It made me more aware of the law and guidelines. I did not score a 100% so I appreciate the opportunity to review my jurisprudence knowledge. |

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| Improved my knowledge of laws and regulations.   |
| I think it was very valuable; it stimulated much dialogue among colleagues.  |
| It made me read the booklet- however the way some of the questions were worded and the wording of some of those policies etc- I am not sure what it was all about  |
| Due to the 'fear factor' for the unknown in completing a test this large, I approached it more with a 'get it done' attitude than a 'what can I learn' attitude. Therefore I didn't maximize the learning opportunity. Unfortunately, we did not get a copy of the entire KKAT after the window of time closed, so we can't check back on our successful answers to ensure that we learned the most we could |
| specific knowledge improved, but practice does not need to change  |
| Current extreme economic climate does not always allow to follow all guidelines  |
| Found it stimulating and beneficial. Resources and scenarios were very helpful. Increases confidence. Thank you  |
| It was too time consuming. It took over 3 hours to do  |
| It was good that we all did it and discussed the questions and what we thought were the answers  |
| I found some of the answers on the exam contradictory to the reading material.   |
| Completing the JKAT was an excellent way of forcing RD's to review the gamut of legislation, regulation, and practice standards. The JKAT was not a TEST per se; rather it was a learning opportunity and the specific document support provided to us during the test reinforced this broader approach.   |
| However, there were some questions that I think failed to get to the answer you were looking at.   |
| Very helpful, without the JKAT, I don't think I would have bothered to sit down and review the laws as it is a bit of a dry read.  |
| Helpful and learned some new things that I wasn't aware of.  |
| Too long represented a day's work. As I work casual I did not receive any compensation.  |
| A good Refresher   |
| way too time consuming for private practice dietitians - needs to be more succinct   |
| Have become more familiar with the jurisprudence handbook.   |
| It updated my knowledge and was a great learning experience  |
| The JKAT tool was useful at familiarizing me to the laws and regulations. Having the pertinent document handy with each question was very useful.  |
| Some questions were a little confusing... but otherwise I thought it was well done!  |
| It is a great way to learn about the laws and standards, some of which I was uncertain about before and have a greater understanding of them now.  |
| The questions I got wrong were somewhat tricky. I liked the linkages to look up the answers. Very useful process.  |
| Wasn't as bad as I thought it would be.  |
| Good suggestion to work in groups - we had some  |
| great discussions - enhance my learning more than  |
| if I had completed on my own.  |
| My previous year's learning goal was to read the Jurisprudence handbook, so I was already knowledgeable and completing the JKAT did not spark the learning for me.   |
| Thank you again for this excellent exercise. It was very valuable.   |
| Connected with another RD to review and discuss some of the questions, overall the exercise, highlighted gaps in my knowledge of -scope of practice, and privacy and confidentiality areas.  |
| It was of value as it showed me some areas of weakness. However, I wonder about the benefit of doing it every 5 years, or if that time could be enlarged.  |
| I appreciated learning format which allowed time, individual work pace, reading references for each question.  |
| Well done exam. Very user friendly. I appreciated the direct links to varied resources required in answering the   |

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| questions.   |
| It was interesting to learn, but from what I recall, most of the situations did not relate to my practice in the government setting.   |
| It reinforced my knowledge.  |
| It verified that I have a very good understanding of the laws and standards.   |
| Clarified some areas of boundary issues and conflict of interest.  |
| Good refresher of knowledge.   |
| I was genuinely surprised at how easy the guide was to read and how relevant the questions on the JKAT were for me and my practice. Much of the content caused me to reflect on my practice and how to improve patient care. Thank you for a process that was truly helpful and full of learning!  |
| Glad that it is only every 5 years!  |
| It caused me to review laws, policies and practice standards and also stimulated discussion with colleagues on these topics.   |
| The reference links did not work for me so had to rely on text only  |
| Reinforced common sense  |
| Excellent exercise. It was extremely helpful to be provided with very specific documents for each and every question. A non-stressful effective way to learn.  |
| helped me appreciate the work the College is doing to improve the profession of dietetics -- congratulations   |
| learnt some new things that I did not know about   |
| Traumatizing to think about doing it, but actually quite interesting once I got started.   |
| It's a review; not bad   |
| Had already spent a lot of time building this knowledge- the JKAT was a good review but not new learning. It promoted good discussion of issues among clinicians.  |
| It was of value, but I was so frustrated that it took so much time to complete.  |
| I found the lead up to completing the JKAT somewhat intimidating. I expected it to be far worse than it actually was and put off starting to complete it longer than I needed to because I was intimidated by the whole thing especially when listening to my colleagues who had started first. - I think we psyched each other out. Not as bad as I anticipated but it did require a lot of time.   |
| Need to repeat this exercise about every 3-5 years.  |
| having a group discussion was very beneficial, lost of animated discussion   |
| I found it a really good way to learn and was really the right type of learning method for me. Great that you could take your time to complete and very easy and straightforward.  |
| I recently completed a lengthy online evaluation on "ethical decision making" for coaching certification and I found their format to be a somewhat better learning approach. After presenting the scenario, and posing the questions, the program reviewed the question immediately and if the response was incorrect, it provided some prompting, and although it did consider it a wrong answer, I found that the prompting and discussion at the time was more constructive, than providing the correct answer after the fact. Just a suggestion for further consideration. |
| I found that reviewing the information before answering questions as well as reviewing the information for questions that I answered wrong gave better insight into proper practice.   |
| It served as a reminder.   |
| It increased my awareness of areas where there could be conflicts and also the need to always leave clear understanding about services provided...   |
| Despite doing it at the last minute, I did learn from completing the tool and feel that my understanding of jurisprudence has increased.   |
| Increased my knowledge regarding laws and regulations. I found the course interesting, however a few times I was unable to find the exact statement needed to complete the question.   |
| It provided real world examples of how to apply the regulations that set the boundaries of my practice as well as how to report incidents involving other professions / practitioners  |

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| helped me identify my weaker areas of knowledge   |
| Thank you for the non-threatening way JKAT was presented - it allowed for an easier learning experience.  |
| Project was very time consuming especially when there is not a computer available at home.  |
| Some of the answers were surprising to me and I was glad to learn the correct answer.   |
| Too many questions regarding reporting abuse and sexual abuse which for people in acute care is usually handled by the MD.  |
| A better understanding of the rules and regulations. I really thought the hand book was excellent.  |
| But..... it was much too long and time consuming, as mentioned before, and many questions were confusing  |
| It confirmed that I was following standards, which is important to me   |
| Became more knowledgeable about the regulations.  |
| It was well set up and easy to follow, although a few questions were ambiguous. I really felt I learned something that was thought-stimulating and practical.   |
| It definitely was a worthwhile exercise.  |
| It was an interesting exercise.   |
| I now feel up-to-date on the laws and standards   |
| It was very well designed with links to important documents and true to life questions/scenarios. Well done.  |
| I would value doing it more often, i.e. every 3 years or as new acts are put in place.  |
| Great opportunity for a comprehensive review.   |
| There were many items that I really hadn't explored in such depth until completing the JKAT. I had read about them previously in "Resume" but quite frankly, I had really glossed over them. The JKAT was extremely valuable will continue to be of benefit in my practice.   |
| Far too time consuming and far too many irrelevant questions i.e. Sexual abuse of clients, partners with substance abuse problems - none of these things are relevant to me. Do you have data on the percentage of dietitians that actually have to deal with these things in his/her career? I would be shocked if it was as high as 1%. Even if a higher percentage of dietitians than I realize have to deal with these things, I sincerely doubt any of them will look back to the experience of completing this JKAT and thinking "Thank God, now I know what to do!" I am sure that if anyone had to deal with such things in real life, they would make the efforts at that time to find out what is the appropriate action. |
| I thought it was exceptionally well organized and administered! Kudos to the developers!  |
| I liked the availability of the on-line assessment + having the links to the various documents was invaluable.  |
| My professional, and ethical responsibility   |
| JKAT is a very worthwhile exercise!   |
| The exercise was informative. I was forced to read the Jurisprudence handbook and became more familiar with the guidelines governing the practice of dietitians.  |
| It gave me the reason to review the documents I was intending on reviewing, but didn't have the chance d/t workload etc.  |
| It reminded me of the various acts etc that I can rely on to practice dietetics competently   |
| It has no benefit   |
| -some questions were more about deciphering ambiguous wording than about showing grasp of an important concept - a common pitfall of designing multiple choice questions  |
| it was a great way to learn very important info that could be "dry, boring" material  |
| I have had a long work career, and learned a lot from the questions and background reading.   |
| The opportunity to discuss issues/scenarios with other dietitians broadened my knowledge of their work settings and how guidelines,etc. could be applied differently.   |
| The JKAT was an incentive to review the Jurisprudence manual sooner rather than later.  |
| The JKAT also confirmed my current knowledge level of the laws etc  |

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| wording of some questions needs to be worked out  |
| Having a PowerPoint presentation summary of each topic would be helpful   |
| I feel I could respond in more detail if this survey was administered following the JKAT.   |
| Found it a good and fair way to learn something that if left up to us may not be a priority.  |
| It should be repeated yearly!   |
| Everyone would benefit.   |
| Better understanding of the laws affecting practice decisions   |
| good practice   |
| Good learning opportunity!  |
| Thank you!  |
| I like the idea that the information was readily available and references to help complete the tool. It made it easier to complete. I now am more knowledgeable of where to find my answers to questions regarding this.                        |
| Increased knowledge of the law  |
| Reminder to review practices and make changes where needed even if small.   |
| It was too long and most of the questions were common sense. If I had a question in one of the areas I would simple look it up....like I did for the JKAT.  |
| It would be, if I knew what questions I got wrong!  |
| This was a very good way to review and learn. Great adult education principles used   |
| I found it brought things to my attention which I had overlooked before   |
| The JKAT is valuable to all practicing RDs despite the areas that they practice in. I strongly disagree with the idea that some RDs were required to complete more questions. I think there is value in all RDs learning equally from the tool. |
| Helped me to be more familiar with the regulations and laws.  |
| The discussion opportunity with peers was very valuable   |
| Any reinforcement is always going to make a difference for the better.  |
| It raised my awareness of some important issues even though the specific detail is about Canadian practice.   |
| many common sense aspects of practice   |
| very time consuming   |
| a great refresher on details that sometimes can be forgotten  |
| JKAT is a very good reminder of key legal issues of which we need to be aware.  |
| identified my 'weak' knowledge areas  |
| Somewhat agree  |
| very useful   |
| I learned more about patient rights and where to  |
| draw the line with regards to providing treatment as  |
| a dietitian. This tool also informed me of my rights if I am the recipient of medical care.   |
| At least I now know that I haven't been doing anything wrong all these years!   |
| I had Just written the DC exam and felt it was repetitive   |
| Made me more aware of law, standards and guidelines for my practice   |
| Loved learning all the laws   |
| I think that completing the JKAT was valuable because it made you think about various different issues that could possibly happen and then you needed to evaluate the best strategy in light of the rules and regulations. I thought it         |

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| was valuable.  |
| I enjoyed being able to work at my own pace. The links to the references were great!! It was a relaxed way to increase my knowledge. A good tool!  |
| Important to be aware of standards, etc of profession even if working in a non-standard setting. Some of the more general standards apply regardless of what one is doing  |
| It took me a long time to complete, however in the end I am so glad I did.   |
| Well done reminder   |
| A few questions were very debatable in my opinion  |
| It enhanced my knowledge in laws and guidelines related dietetics practice   |
| Not well run by the company administering it. Unable to access through sympatico...this should have been worked out well in advance and didn't receive responses to my problems until a week later   |
| Furthering my knowledge has value.   |
| This was one of the most valuable learning tools I have completed (stated before) in a long time! As you heard, many of us did not want to complete the exam, but the majority of us learned vastly and enjoyed taking the exam!   |
| Good review/refresher.   |
| I enjoyed this type of learning. Reading the material once was not enough to answer the questions; one need to give thoughtful consideration to the question and then review the information again to ensure that the answer was correct.  |
| It was very valuable.  |
| Review and refresh myself with the guidelines in my practice.  |
| I already read the Jurisprudence and was aware of the contents. In the past two years of my work experience I have tried to follow all the discussed laws and obligations.   |
| The initial hurdle in engaging in the requirement to complete this was the anticipation of significant time commitment but it was not onerous and the value for time was high.   |
| Provided opportunity for refresher/updating new info which reinforced self confidence, especially as my primary area of practice is now outside the traditional healthcare setting.  |
| I think this is a terrific tool in so far as <ul style="list-style-type: none"> <li>- enabling the practitioner to choose the best learning style to suit her/him</li> <li>- permitting the practitioner to progress at a pace suitable to her/him</li> <li>- providing the links to the necessary background and supporting material or documentation</li> <li>- not only enabling the learner, but also reinforcing one's understanding AND application of the material/key learning points</li> </ul> |
| Thank you!   |
| Good review! Learned a couple of things.   |
| I feel this was a much better way than the PA test to assess an RD's knowledge as well as to encourage further learning with regards to these issues.  |
| I thought it was very well done. Congratulations!  |
| Not in clinical practice. Thought it was too long and questions required looking up. Not clear the extent of detail that was asked was required. Need to know where to go to get the info we need.   |
| I did it because it was mandated. I honestly can say that I can't remember where I have got to improve (although with 3 questions wrong, couldn't be much). I think that some of the language in the jurisprudence rules and subcategories could be made easier to understand. Some of the wording when I was reading through, trying to find  |

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| an answer still left my head reeling.  |
| But set-up was a bit strange --having to re-write whole test vs. just the ones you got wrong seemed draconian (and I passed first time- but the thought of it...)  |
| Of the questions that I answered correctly, I felt reassured and more confident about my practice. Of those that I answered incorrectly, I felt they were an opportunity to clarify gray areas.  |
| Mad me read the jurisprudence otherwise would not have found the time to do this   |
| Although I did find that I learned quite a bit thought the experience. I found the exam to be WAY too long; and the expected grade level too high. There has to be a shorter and better way to evaluate our understanding. This test combined with the SDL tool is ridiculous. There is no way that all that work can be expected of dietitians who are already very busy in their jobs.                 |
| There is absolutely no need for this sort of information in the position I hold with the government. There should be more screening of the information already provided to the college regarding place of practice before this sort of course is made mandatory.   |
| As I completed the previous exam, I felt my learning was greater then, than for the JKAT. However, because I had completed the exam, it was much easier to complete the JKAT and therefore I felt I didn't gain much more knowledge (as I had studied a fair amount for the exam). It would have been different if I hadn't completed the exam. I though support the JKAT approach compared to the exam. |
| It was frustrating at first and long but I acknowledge it was helpful, I appreciated the fact that the feedback for wrong answers gave the right choice with explanation, it felt like a learning tool as opposed to a testing tool. I found also frustrating when the reference for the answers was given from the whole document being many  |
| I found that I changed my original answers thinking that there was more to the questions. I should have used my first answers. I would have only had one mistake. I do feel that it helped me. I feel I am working in the right direction.   |
| Refresh and reaffirm   |
| I appreciated the case scenarios and the problem solving associated with it.   |
| It was too long and I resented that is was so much longer for private practice than the other two areas of practice.   |
| More aware of my practice.   |
| First, it reinforced the ethical approach to how I was trained and have been practising our profession. It also was informative to understand the obligations around the processes we have in place to be sure the entire profession is behaving in the public interest.   |
| The Jurisprudence handbook for Dietitians in Ontario was a great information piece that I read prior to completing the JKAT and this was a great reminder of my obligations.   |

## Appendix E

### General Comments

| Response Text   |
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| If this were useful to me, then it would have had some value.   |
| It is important to understand and be aware of the laws, standards, guidelines and ethical principals.<br>Thank you  |
| This was a good source of support.  |
| Appreciate the publication of the book. Would prefer if it was in plain language to facilitate interpretation.  |
| Websites and resources very beneficial, in addition to the Resumes.   |
| Sends out Resume, record keeping guidelines, JKAT book, etc.  |
| Having the JKAT forces me to review the laws and guidelines and allows me to know what my rights are as a dietitian, as we don't learn this in school, nor necessarily in our internship. |
| This innovative idea of evaluating of the JKAT indeed is a great support to my profession.  |
| The JKAT tool was too long. The responsibility was all on SELF education and testing rather than education from the college   |

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| Great resource, from i.e. workshops and asks opinions of its members   |
| The "Resume" is very informative & the college has provided workshops & has come to my work setting to review guidelines, regulations, etc.  |
| CDO does a great job at providing dietitians with information about laws etc. when asked for that information. I don't feel that we need to be quizzed on them.  |
| Seminars, newsletters, email.  |
| Thank you. This support is much appreciated in such a fast moving world.   |
| The cross-references to supporting material were very helpful while answering the questions, and I wish I could just look that up to help me focus my reading.   |
| Question if a few of the answers were incorrect. I went over the info on the question I answered incorrectly, and it seems as though the answer according to CDO is incorrect. Does CDO plan to review the questions again?  |
| Provided individual copy of the Jurisprudence Handbook and the JKAT included the relevant documents linked to each question for ease of reference.   |
| Publications, case scenarios   |
| I find CDO an excellent resource. They have always provided helpful answers when I have e-mailed the quality assurance representative.   |
| We could have easily learned by reading the publication as opposed to having an exam to write.   |
| It is important to have a guideline in place to refer to when needed   |
| I recommend that the College conducts ongoing educational workshops, seminars, webcast seminars, small group meetings and discussion across the provinces, to teach, update and share the jurisprudence knowledge with all its members.  |
| Thank you.   |
| Via the mail outs, website, and JKAT of course!  |
| I enjoyed completing the JKAT as I could do it on my timetable. I also appreciate the lecture series that the college presents. I attended last year & intend to again this year.  |
| This program gives everyone an opportunity to increase knowledge regarding standards, laws, guidelines and ethical principles necessary to be applied in practice. The updated handbook is an excellent resource for our profession. I also find the Resumes informative as many of the standards and laws etc are all in these. The on line course was very good as one could be connected to the material instantly for any given question.  |
| I find that CDO is more of a 'policing' entity than an organization that assists dietitians in meeting their continuing education requirements & professional needs. The impression I get is that the real purpose of CDO is to protect the public (which I don't have a problem with), not to assist dietitians in their profession. For example, CDO requires that we complete a continuing education tool, but makes no effort in providing resources to assist dietitians in meeting continuing education requirements. Another example is the JKAT exercise where we were required to complete this mandatory training, yet can't claim it as a continuing education activity. This places Ontario dietitians in the situation where they have to register to CDO to be able to practice and also register to CDA to obtain assistance on professional issues. As a result, we pay more money than any professional I know to be registered to our professional organizations. I must admit to being 'irked' when I receive the glossy CDO annual reports & think that I am paying \$500.00 a year for CDO to promote itself. Another issue is that CDO is forcing dietitians to rely on the internet more and more, in order to decrease the amount of mailings it has to send out, yet we don't see any impact of the resulting savings on our annual fees. |
| I also found the tone adopted by CDO for the entire JKAT exercise was dictatorial and unnecessary. Why impose a 3 month (or less) time limit to complete the assessment?   |
| The test is good but implementation could be improved. Nasty letter sent when I failed the pilot test.   |
| I appreciate the information in Resume and e news and the info learned from JKAT, I find this a far better learning tool than the yearly SDLT evaluation   |

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| JKAT was useful in this matter.  |
| Will be at fall in-service to continue my learning.  |
| This is essential to the profession  |
| The JKAT was the best learning opportunity so far. I loved the format and the fact that all referenced documents were available at the click of a button. It really cemented any issues which were not completely clear.   |
| N/C  |
| Exam with 71 questions some repeats are confusing. Questions are tricky with some trick questions. I don't feel as confident as I did before because of these kinds of questions. Material when red is straight forward but examination questions confused the issues fairly often.                    |
| great tool   |
| CDO provides numerous written materials to support learning; the question and answer scenarios in Resume help to focus the written material in work settings, and the opportunity to talk to an RD directly regarding these issues is very valuable.   |
| Good Review and refresher in an easy to follow format.   |
| They do not get involved early enough. It needs to be done in University and during internship. Can CDO get involved earlier or are they already there?  |
| good support   |
| more scenarios are helpful-realistic ones  |
| I appreciate the commitment of the College to help us remain current and professional  |
| resume newsletter are always very informative  |
| CDO there the answer questions, when needed  |
| JKAT Book is a great resource tool   |
| Information is always being provided and updated.  |
| I really appreciated those two jurisprudence books - nice to have it all in one place to look up.  |
| The manual is very helpful, easy to use & referred to regularly.   |
| BUT would like to have easy access to some of the info and scenarios/case studies as in the JKAT   |
| The JKAT format for learning and testing was helpful   |
| I have noticed a change in the way CDO appears to be supporting our profession. I am happy with this change as I feel more supported and my opinions are being taken into consideration.   |
| I was initially concerned about the JKAT but found it a very useful process. I appreciated the way it was set up primarily as a learning tool rather than an exam requiring extensive prior study, and am now much more familiar with relevant laws etc as well as resources to learn more about them. |
| This exercise was very useful  |
| Hats off to you on creating this tool! I currently belong to both College of Ont and AB. I have informed College of AB of this tool and strongly encouraged them to investigate incorporating similar or identical tool. There is no need to re-invent the wheel!                                      |
| I feel CDO is starting to support me in the above.   |
| CDO has been very supportive and helpful in the learning process in my practice.   |
| This exercise format and content was very user-friendly and convenient.  |
| The past 2 CDO road shows have been a little weak and did not help as much as previous workshops. However, the online links to regulations and laws affecting our practice was amazing in the JKAT.  |
| I like the "road shows". Any coming up in the fall?  |
| -I would be lost without the Jurisprudence Handbook to refer to and especially the 'case scenarios'  |
| continuing to provide opportunities in a non-threatening manner - liked the group discussion idea encouraged by the college - maybe could be more formalized and facilitated by college reps   |
| There was no support there was just an exam which was WAY too long- there were just too many questions   |
| I also enjoyed the various workshops offered i.e. next one in October on electronic recording...it is just an  |

afternoon and the topics are generally relevant.

Excellent review of areas of practice.

The body of knowledge that has been generated and the process to share and examine our understanding of the key principles is important to our profession.