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Republic of the Philippines Professional Regulation Commission Manila



PROFESSIONAL REGULATORY BOARD OF RESPIRATORY THERAPY Resolution No. 03 Series of 2017

OPERATIONAL GUIDELINES IN THE IMPLEMENTATION OF RA 10912, OTHERWISE KNOWN AS "CONTINUING PROFESSIONAL DEVELOPMENT (CPD) ACT OF 2016" FOR RESPIRATORY THERAPY

WHEREAS, Section 2, Article I of Republic Act (RA) No. 10024, otherwise known as the Philippine Respiratory Therapy Act of 2009, provides for the policy of the State to regulate and professionalize the practice of Respiratory Therapy, *to wit:*

"Section 2. Declaration of Policy. The state recognizes the importance of Respiratory Therapists in nation building. Hence, it shall develop and nurture competent, virtuous, productive and well-rounded Respiratory Therapists whose standards of practice and service shall be excellent, qualitative, world-class and globally competitive through inviolable, honest, effective and credible licensure examinations and through regulatory measures, programs and activities that foster their professional growth";

WHEREAS, Section 8, Article II of RA 10024 provides for the Powers and Functions of the Professional Regulatory Board of Respiratory Therapy (Board) and one of those is to provide guidelines and criteria in the Continuing Professional Education/Development program for Respiratory Therapist;

WHEREAS, Section 32, Article IV of the said law states that all Respiratory Therapists shall abide by the requirements, rules and regulations regarding Continuing Professional Education/Development as promulgated by the Board in collaboration with the Integrated Professional Organization of Respiratory Therapist;

WHEREAS, under Section 15 of Article IV of Republic Act 10912, otherwise known as Continuing Professional Development Act of 2016, the Professional Regulatory Boards are given the authority to prescribe their own requirements or procedures relating to the CPD as may be pertinent and applicable to their respective profession, **PROVIDED**, that the same does not contravene any of the provisions of R.A. 10912 and its Implementing Rules and Regulations (IRR);

WHEREAS, after a series of consultative meetings with the stakeholders, it was agreed that the Board will fully adopt the Implementing Rules and Regulations (IRR) of R.A. 10912 and this Operational Guidelines.

NOW THEREFORE, the Professional Regulatory Board of Respiratory Therapy hereby **RESOLVED**, as it now **RESOLVES** to formulate its own Operational Guidelines of the CPD Program in accordance with the provisions of R.A. 10912 and its Implementing Rules and Regulations as follows:

Section 1. Date/s of Regular Meeting/s. – The CPD Council under the supervision of the Board, is hereby mandated under this resolution to meet every 3rd Tuesday of the month for the purpose of evaluating the application for accreditation as CPD provider, CPD program, self-directed and/or lifelong learning and other CPD related matters.

P. PAREDES ST., CORNER N. REYES ST., SAMPALOC, MANILA, PHILIPPINES, 1008 P.O. BOX 2038, MANILA Page 2 of 4 PROFESSIONAL REGULATORY BOARD OF RESPIRATORY THERAPY Resolution No. 03 Series of 2017 OPERATIONAL GUIDELINES IN THE IMPLEMENTATION OF RA 10912, OTHERWISE KNOWN AS "CONTINUING PROFESSIONAL DEVELOPMENT (CPD) ACT OF 2016" FOR RESPIRATORY THERAPY

Section 2. List of additional requirement for accreditation of CPD Provider. – The list of documentary requirements for accreditation of CPD Local and Foreign Provider as provided in Resolution No. 1032, Series of 2017, otherwise known as the "Implementing Rules and Regulations (IRR) of Republic Act No. 10912, is hereby adopted. However, for Local Provider under the classification of Individual/Sole Proprietor, he/she must be a Registered and Licensed Respiratory Therapist. A copy of Application Form as CPD Provider for Respiratory Therapists is herein attached as Annex "A".

Section 3. List of additional requirement for accreditation for CPD Program. – The list of documentary requirements for accreditation of CPD Program as provided in Resolution No. 1032, Series of 2017 is also adopted. A copy of Application Form is herein attached as Annex "B".

However, the template of Instructional Design shall be followed by the CPD providers. A copy thereof is herein attached as Annex "C".

Section 4. List of additional requirement for CPD Provider Completion Report. – The list of documentary requirements for the submission of Completion Report by the CPD Provider as provided in Resolution No. 1032, Series of 2017 is also adopted. However, if no Monitor is available to monitor the said CPD program, a video recording of the actual conduct of the approved CPD program will be submitted. A copy of Completion Report is herein attached as Annex "D".

Section 5. Maximum Creditable Units for Self-Directed and/or Lifelong Learning. – The maximum creditable units for self-directed and/or lifelong learning is 15 in a compliance period of three (3) years except for those activities enumerated under the Academic Track of the Matrix of CPD Activities (Annex "K" of PRC Resolution No. 1032). However, consideration will be given to Respiratory Therapist practicing abroad, subject to validation of the CPD Council.

Section 6. Major Areas of CPD Activities. – The CPD Activities shall be divided into two (2) major areas which shall be complied with in a compliance period after its full implementation on January 2019 with the corresponding required credit units, as follows:

MAJOR AREA	COVERAGE OF THE AREA	MINIMUM CREDIT	
Ethics	Ethics, Values & Attitude	5	
Professional Development	Technical, Clinical & Academe	40	

Section 7. Required CPD Credit Units in a Compliance Period. – All Respiratory Therapists shall be required to comply with 45 CPD credit units in a compliance period of three (3) years, which the implementation thereof shall be gradual in the following period:

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YEAR OF RENEWAL	REQUIRED NUMBER OF CREDIT UNITS
January to June 2017	0
July to December 2017	15
January to December 2018	30
January 2019 – onwards	45

Section 8. Repealing Clause. - All resolutions, Orders, Circulars, Issuances and parts thereof which are inconsistent with this Resolution are hereby repealed or modified accordingly.

Section 9. Effectivity. - This Resolution shall take effect after fifteen (15) days following its full and complete publication in the Official Gazette or in major newspaper of general circulation in the country.

Let copies hereof be furnished to the U.P. Law Center, Board, CPD Council, Office of the Board Secretary, Standards and Inspection Division, Legal and Investigation Division, all Regional Offices and other involved units of the Commission for their guidance.

Done in the City of Manila, this 1st day of August , 2017.

JULITA V. TOLEDO

Chairperson

SENEN

JESUS M. ESPINAS Member

Attested to:

Lafi J. Beth

Atty. LOVELIKA T. BAUTISTA Officer-In-Charge Secretary to the Professional Regulatory Boards Page 4 of 4 PROFESSIONAL REGULATORY BOARD OF RESPIRATORY THERAPY Resolution No. ______ Series of ______ OPERATIONAL GUIDELINES IN THE IMPLEMENTATION OF RA 10912, OTHERWISE KNOWN AS "CONTINUING PROFESSIONAL DEVELOPMENT (CPD) ACT OF 2016" FOR RESPIRATORY THERAPY

APPROVED BY:

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TEOFILO S. PILANDO, JR.

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ANGELINE T. CHUA CHIACO Commissioner

ANDA D. REYES Commissioner

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OFFICIAL (GAZETTE) : 8-3-17

ANNEX "A"

	- NOR	APPLICATION FOR ACCRE	EDITATION AS CPD PROVIDER (LOCAL)
ļ		CPD Council of RESP	IRATORY THERAPY
	New	Ren	ewal Accreditation No
	Part I. Person Name of Provi	al / Corporate Information der:	
[Classification: Individual/S Address:	ole Proprietorship	ip/Corporation Government Institution/Agency
	Telephone No		Fax No.:
-	E-mail Addres	s:	Website:
	Contact Perso	n:	Contact No.:
	written by me knowledge ar other agencies documents pro	CERTIFY that the above information are true and correct to the best of my ad belief. I further authorize PRC and is to investigate the authenticity of all the esented.	SUBSCRIBED AND SWORN to before me this
		Position	(Notary Public)
de	Part III. Actio	Date n Taken	
polic	and the second sec	Inspection Division – CPD:	Cash Division:
t	Pro Dat	cessed by: te :	Amount : O.R.No./Date : Issued by :
_	Reviewed by		
- and		OIC, Standards and	d Inspection Division
Æ		ACTION TAKEN BY	THE CPD COUNCIL
en		Deferred pending compliance	
erner	C	Disapproved due to	
X		Chair	person
m		Member	Member
5		Date	

Professional Regulation Commission

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	OR ACCREDITATION AS CPD PROV	
at PRC website (www.prc.go Step 2. Fill-out Application Form and	v.ph). comply the required documents. Applic ed and two (2) photo copies with the cor	ation should be filed in three (3)
and fastener. (Please provid	e one (1) set for receiving copy)	
Step 3. Proceed to Standards and Ins	spection Division processing window for	evaluation and assessment.
Professional Regulation Com	Postal Money Order, Manager's Check, mission) of Five Thousand Pesos (P 5,0	Bank Draft payable to
Step 5. Submit Application Form with	attached supporting documents and thr	ee (3) photocopies of official
receipt to the Standards and I	nspection Division designated window.	
the former and the statement of the	CHECKLIST OF REQUIREMENTS SUPPORTING DOCUMENTS	
Individual / Sole Proprietor	Firm / Partnership / Corporation	Government Institution/Agency
 [] Résumé must include: relevant Educational background, current employment, profession, principal area of professional work & No. of years in the practice of the regulated profession [] valid Professional Identification Card as Respiratory Therapist [] Company Profile must include Mission, Vision, Core Values and if any, a list of previous training activities conducted [] List and photographs of training equipment and facilities [] Instructional Design (one) [] Annual plan of proposed CPD Activities [] DTI Certificate of Registration (authenticated copy) [] NBI Clearance (original) [] BIR Certificate of Registration (authenticated copy) [] Notarized Affidavit of Undertaking (SID-CPD-06) 	 [] Company Profile must Include Mission, Vision, Core Values and if any, a list of previous training activities conducted [] List of Officers with valid Professional ID Card (if applicable) [] List and photographs of training equipment and facilities [] Instructional Design (one) [] Annual plan of proposed CPD Activities [] Appointment paper from the managing partner or Board Resolution of a Corporation authorizing a partner or officer to manage the CPD activities [] SEC Certificate of Registration and Articles of Incorporation or Partnership and their respective By-laws (authenticated copy) [] BIR Certificate of Registration (authenticated copy) [] Notarized Affidavit of Undertaking (SID-CPD-06) 	 [] Copy of charter or Republic Act establishing the agency [] Instructional Design (one) [] Annual plan of proposed CPD Activities [] Office Order from the head of Agency appointing its officer to manage the CPD activities
 [] Appointment paper from the mana officer to manage the CPD activities, if th to manage the CPD activities, if th [] Notarized Affidavit of Undertaking Additional Requirements: [] Short brown envelope for the Cere [] One set of metered documentary Certificate of Accreditation. (Avail Note:	equipments and facilities tivities rporation or Partnership n or Partnership and their respective by aging partner or Board Resolution of a G es or Office Order from the head of gov nere are changes. (SID-CPD-06) tificate of Accreditation stamps worth Twenty-Five Pesos (P25 lable at PRC Customer Service and PR on/s for accreditation and claiming the C etter of authorization and valid identif	Corporation authorizing a partner or vernment agency appointing its office 5.00) to be affixed to the C Regional Offices) Certificate of Accreditation in behalf of ication cards of both the authorize

Professional Regulation Commission

APPLICATION FOR ACCREDITATION OF CPD PROGRAM

CPD Council of RESPIRATORY THERAPY

	Part I. General Information	
	Name of Provider:	
ľ	Accreditation No.:	Expiration Date:
	Contact Person:	Designation:
	Contact No.:	Date of Application:
		bale of Application.
	Proposed Program:	
	Seminar Seminar/Workshop Residency Trai	ining Tours & Visits Others
	Date to be offered:	Time / Duration:
	Place / Venue:	No. of times program to be conducted:
	Course Description:	
	Objectives:	
	Target Participants / No.:	Registration / Seminar Fee to be collected:
	Part II. Acknowledgment	
	I HEREBY CERTIFY that the above information written by	SUBSCRIBED AND SWORN to before me this day
	me are true and correct to the best of my knowledge and belief. I further authorize PRC and other agencies to	of 20 at, affiant exhibited to me his/her valid government issued ID
	investigate the authenticity of all the documents presented.	issued at on
	у	on
	Signature Over Printed Name	
	Signature Over Printed Name	
	Position	(Notary Public)
	Date	
, I	Part III. Action Taken	
1		Cook Division
11	Standards & Inspection Division – CPD:	Cash Division:
11		Amount
	Standards & Inspection Division – CPD: Processed by: Date :	Amount :
	Processed by: Date :	Amount
	Processed by:	Amount : O.R.No./Date :
	Processed by: Date :	Amount : O.R.No./Date :
	Processed by: Date :	Amount : O.R.No./Date :
	Processed by: Date : Reviewed by: OIC, Standards and	Amount : O.R.No./Date : Issued by :
	Processed by: Date : Reviewed by: OIC, Standards and	Amount : O.R.No./Date : Issued by :
	Processed by: Date	Amount : O.R.No./Date : Issued by : d Inspection Division
	Processed by: Date Reviewed by: OIC, Standards and <u>ACTION TAKEN BY</u> Approved for Credit Units Disapproved	Amount : O.R.No./Date : Issued by : d Inspection Division
	Processed by: Date Reviewed by: OIC, Standards and <u>ACTION TAKEN BY</u> Approved for Credit Units Disapproved	Amount : O.R.No./Date : Issued by : d Inspection Division
	Processed by: Date Reviewed by: OIC, Standards and <u>ACTION TAKEN BY</u> Approved for Credit Units Disapproved	Amount : O.R.No./Date : Issued by : d Inspection Division
	Processed by: Date Reviewed by: OIC, Standards and <u>ACTION TAKEN BY</u> Approved for Credit Units Disapproved	Amount : O.R.No./Date : Issued by : d Inspection Division
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	Processed by: Date	Amount : O.R.No./Date : Issued by : d Inspection Division THE CPD COUNCIL Accreditation No

	PROCEDURE FOR ACCREDITATION OF CPD PROGRAM
Step 1	. Secure Application Form at the Standards and Inspection Division counter (Window 3) or download at PRC website (www.prc.gov.ph).
Step 2	 Fill-out Application Form and comply the required documents. Application should be filed in three (3) copies: One (1) original signed and two (2) photo copies with the complete requirements with folder and fastener. (Please provide one (1) set for receiving copy)
Step 3 Step 4	 Proceed to Standards and Inspection Division processing window for evaluation and assessment. Pay prescribed fee (in cash, Postal Money Order, Manager's Check, Bank Draft payable to Professional Regulation Commission) of One Thousand Pesos (P 1,000.00) per offering of the program.
Step 5	 Submit Application Form with attached supporting documents and three (3) photocopies of official receipt to the Standards and Inspection Division designated window.
	CHECKLIST OF REQUIREMENTS
	SUPPORTING DOCUMENTS
[] [] [] [] []	Specific course Objectives stating competencies to be gained from program Evaluation tool specific to course objectives set Instructional Design Program of Activities showing time/duration of topics/workshop Resume of Speakers for program applied for, showing expertise in the topic/s; show certificates or citations (if any) Current Prof. ID of speaker if registered professional; if foreigner, current Special Temporary Permit, if applicable Breakdown of expenses for the conduct of the program
	Short brown envelope for the Certificate of Accreditation
[]]	One set of metered documentary stamps worth Twenty-Five Pesos (P25.00) to be affixed to the Certificate of Accreditation. (Available at PRC Customer Service and PRC Regional Offices)
Note:	
2.	Application for accreditation should be filed 45 days before the offering of the program/training. Representative/s filing application/s for accreditation and claiming the Certificate of Accreditation in behalf of the applicant must present a letter of authorization and valid identification cards of both the authorized signatory and the representative. The period for processing the application is 45 days.
4.	If additional requirement/s is/are needed, a period of 7 days is given to submit the same. Failure to comply within the period shall be construed as abandonment of application and the prescribed fee shall be forfeited in favor of the government.

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ANNEX "C"



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TEMPLATE FOR INSTRUCTIONAL DESIGN FOR RT CPD PROGRAMS

CPD Council of RESPIRATORY THERAPY

1. Course/Program Title: _

2. Course/Program Description:

- what the c/p encompasses or covers
- justify or provide reasons why the c/p is offered
- why is there a need for this c/p
- what core competencies or learnings are addressed by this c/p

3. Major Course/Program Objectives:

- what is expected from the course/program
- 4. Participants Description (characteristics, entry competency level/prerequisite/s):
 - entry competency level/prerequisites: For example, Advance Critical Respiratory Care course cannot be offered to new RT graduates since Advance Critical Respiratory Care requires experience and a certain competency level.
 - NOT IN NUMBER OF YEARS but on competencies already demonstrated by the participant.
- 5. **Instructional Design** (these are the minimum contents/columns required, Provider may add more columns as needed):

Learning Out- comes	Time allotted for each topic	Topics to be dis- cussed	Specific Objec- tives for the topics or subtopics	Instructional De- livery Methods (learning strate- gies/activities)	Evaluation Me od
			9		

ÉVALUATION by the CPD PROVIDER:

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- If c/p offered requires **skills training**, a checklist of steps of the procedure is expected listing the steps, columns for done or not done; passing rate (If the participant achieves ____% minimum of crucial steps in procedure, is this considered passing?)
- Provider will determine how much percentage will be considered passing. Will remedial course be offered so that the participant who fails can eventually complete and pass the evaluation and thereby receive a certificate of completion for course offering? When and how many chances will the participant be given the chance?

PURPOSE OF EVALUATION BY THE CPD PROVIDER:

- Is to check if the participants achieved the learning outcomes intended. CPD Provider has to ensure confidence in the program that it designed.
- If the evaluation of the outcomes is not properly done, then the CPD program is considered weak or poor.
- It is the responsibility of the CPD provider to ensure that the participant achieved learning outcomes through the use of proper evaluation tools.
- Self-evaluation by the participant is not sufficient proof of having achieved learning outcomes.

Outline on how you will measure the effectiveness of your training using Kirkpatrick's 4 levels of evaluation:

How to Apply the Model

Level 1: Reaction

Start by identifying how you'll measure reaction. Consider addressing these questions:

- Did the trainees feel that the training was worth their time?
- Did they think that it was successful?
- What were the biggest strengths of the training, and the biggest weaknesses?
- Did they like the venue and presentation style?
- Did the training session accommodate their personal learning styles?

Next, identify how you want to measure these reactions. To do this you'll typically use participant's satisfaction survey, focus group or questionnaires; however you can also watch trainees' body language during the training, and get verbal feedback by asking trainees directly about their experience.

Level 2: Learning

To measure learning, start by identifying what you want to evaluate. (These things could be changes in knowledge, skills, or attitudes.)

It's often helpful to measure these areas both before (pre) and after (post) training. So, before training commences, test your trainees to determine their knowledge, skill levels, and attitudes.

Once training is finished, test your trainees a second time to measure what they have learned, or measure learning with interviews or verbal assessments.

Level 3: Behavior

It can be challenging to measure behavior effectively. This is a longer-term activity that should take place weeks or months after the initial training.

Consider these questions:

- Did the trainees put any of their learning to use?
- Are trainees able to teach their new knowledge, skills, or attitudes to other people?
- Are trainees aware that they've changed their behavior?

One of the best ways to measure behavior is to conduct observations and interviews over time.

Level 4: Results

Of all the levels, measuring the final results of the training is likely to be the most costly and time consuming. The biggest challenges are identifying which outcomes, benefits, or final results are most closely linked to the training and coming up with an effective way to measure these outcomes over the long term.

Here are some outcomes to consider, depending on the objectives of your training:

- Increased employee retention.
- Increased production.
- Higher morale.
- Reduced waste.
- Increased sales.
- Higher quality ratings.
- Increased customer/patient satisfaction.
- Fewer staff complaints.



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COMPLETION REPORT ON CPD PROGRAM

CPD Council of RESPIRATORY THERAPY

Accredita	tion No.:			Expiry Date:
Contact F	erson:			Designation:
Contact N	lo.:			
	rogram Accreditatio	n		
Title of th	e Program:			
Accredita	tion No.:			Date of Accreditation:
Date Star	ted:			Date Completed:
Place / V	enue:			
Total Nur	nber of Participants:			Date Applied:
Executive	Summary:			
ð				
	Acknowledgment			
I HERE written b knowledg other age	Acknowledgment BY CERTIFY that y me are true and c ge and belief. I furt encies to investigate its presented.	orrect to the b	est of my PRC and	SUBSCRIBED AND SWORN to before me this day of
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ANNEX."D"

4. .(*

	PROCEDURE FOR COMPLETION REPORT
Step 1.	Secure Application Form at the Standards and Inspection Division counter (Window 3) or download at PRC website (www.prc.gov.ph).
Step 2.	Fill-out Application Form and comply the required documents. Please provide one (1) set for receiving copy.
Step 3.	Proceed to Standards and Inspection Division processing window for submission.
	CHECKLIST OF REQUIREMENTS
	SUPPORTING DOCUMENTS
] Lis] Su] Vi	st of Participants (Name & PRC License No.) st of Lecturers, Resource Speakers, etc. (Name & PRC License No.) ummary of evaluation of Speakers in Tabular Form deo Recording of the proceedings, if the activity was not physically monitored by PRC authorized onitor/s

