

CONTINUING EDUCATION PLAN TEMPLATE

REGISTRANT INFORMATION			
Name and Designation:		User ID:	
Job Title:			
Industry of Practice:			
Area(s) of Practice (including any anticipated changes):			
Dates that this CE Plan applies to:	From:		To:
<i>Note: Please fill in the dates that correspond to the time period this CE Plan covers, not the reporting year. Usually, the "From" date is the date the CE Plan was first created, and the "To" date is the date you expect to complete your next CE Plan (e.g., one year from the date it was created).</i>			

REVIEW OF PREVIOUS YEAR'S ACTIVITIES	
<p>In reviewing your CE Plan for the previous year, did you complete all of your planned activities? Why or why not?</p>	

PRACTICE RISK ASSESSMENT	
By which method have you assessed your practice risks?	<input type="checkbox"/> Engineers and Geoscientists BC Practice Risk Assessment Tool* <input type="checkbox"/> Other risk assessment
If you have used another risk assessment, please briefly describe the method and outcomes.	
<input type="checkbox"/> I have assessed the risks of my practice and will use continuing education opportunities to learn about and reduce those risks where necessary.	
<i>* Note: See the "Appendix to the Continuing Education Plan Template – Practice Risk Assessment Tool" that follows this form.</i>	

CONTINUING EDUCATION PLAN TEMPLATE

REVIEW OF LEARNING NEEDS		DEVELOPMENT PLAN		
In what area of my practice do I need to improve my performance, skills, or knowledge?	What do I need to learn to achieve or maintain Competency in this area?	What activities do I need to obtain this learning?	How will I evaluate a successful outcome?	What is my deadline for meeting this outcome?
Area 1:				
Area 2:				
Area 3:				
Based on the above development plan, please list at least three activities you plan to complete in the upcoming Three-Year Rolling Period.		Activity 1:		
		Activity 2:		
		Activity 3:		
		Activity 4:		
List at least one Ethical Learning activity or topic you plan to pursue this year.				

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REVIEWER INFORMATION (IF APPLICABLE):	
<i>Note: All registrants are highly encouraged, but not required, to review their CE Plan with another person, such as a peer or manager. Please refer to Section 3.3.1 for more information.</i>	
Name of Reviewer:	
Position/Relationship: (e.g. Manager, Supervisor, Mentor, Peer)	

CE PLAN DECLARATION			
I, the registrant who created this CE Plan, hereby declare that the information presented above is true and complete to the best of my knowledge.			
Signature:		Date:	

Note: See the “Appendix to the Continuing Education Plan Template – Practice Risk Assessment Tool” that follows this form.

APPENDIX TO THE CONTINUING EDUCATION PLAN TEMPLATE

PRACTICE RISK ASSESSMENT TOOL

Using the risk assessment matrix and questions below, rate the risk of your practice for both likelihood and consequence. The risk of your practice is defined here as a function of the likelihood of failure (i.e., how likely is a failure in my practice and what factors contribute to that likelihood) and the consequences of failure.

The questions will help you evaluate the risk of your practice by helping you to think about the elements of your practice that decrease the likelihood of failure as well as the consequence(s) if failure were to occur.

The questions acknowledge two types of risk factors:

- Some risk factors may be inherent to your practice; the risk level for these may be difficult to change without changing the nature of your role. It can still be useful to identify these risk factors and think about how they might change with changes in your roles and responsibilities.
- Other risk factors may be directly affected by the amount and type of CE learning you choose to undertake. When choosing your CE activities, think about what activities could help you reduce the risk of your practice in these areas.

Note that this tool is meant to aid with reflecting on practice risks and does not attempt to be a comprehensive or definitive assessment of practice risks. Registrants are encouraged to adapt this tool as necessary to better fit their particular circumstances. For example, the questions may not include all risk factors for your specific area(s) of practice; where appropriate, you can include any other factors affecting your likelihood or consequence of failure.

In addition, the assessment uses a simple average across the scores for each risk factor in the questionnaire. If you feel that some risk factors are more important than others, you can consider giving more weight to these factors in assessing your overall rating for likelihood or consequence of failure.

Table B - 1: Risk Assessment Matrix

LIKELIHOOD OF FAILURE	Highly Likely (5)	Moderate	High	High	Very High	Very High
	Likely (4)	Moderate	Moderate	High	High	Very High
	Possible (3)	Low	Moderate	Moderate	High	High
	Unlikely (2)	Low	Moderate	Moderate	Moderate	High
	Rare (1)	Low	Low	Low	Moderate	Moderate
		Very Low (1)	Low (2)	Medium (3)	High (4)	Very High (5)
CONSEQUENCE(S) OF FAILURE						

LIKELIHOOD OF FAILURE: Answer as many of the following questions that are relevant to you about factors that may affect the likelihood of failure in your practice, then select the likelihood score based on the average scoring of your responses.

RISK FACTORS RELATED TO A REGISTRANT'S ROLE					SCORE
1. What is your level of experience?					
(1) Senior	(2)	(3) Intermediate	(4)	(5) Junior	
2. How much supervision do you receive in your role?					
(1) Complete	(2)	(3) Partial	(4)	(5) None	
3. How frequently do you take part in lessons-learned exercises following the completion of a project?					
(1) Frequently	(2)	(3) Occasionally	(4)	(5) Never	
4. How much access to expertise in your area(s) of practice do you have?					
(1) Regular/frequent	(2)	(3) Occasional	(4)	(5) No access	
RISK FACTORS INFLUENCED BY ETHICAL LEARNING					
5. How familiar are you with the Code of Ethics and your obligations under it?					
(1) Very familiar	(2)	(3) Somewhat familiar	(4)	(5) Not at all familiar	
RISK FACTORS INFLUENCED BY TECHNICAL LEARNING					
6. How familiar are you with current codes, standards, and regulations in your technical area(s) of practice?					
(1) Very familiar	(2)	(3) Somewhat familiar	(4)	(5) Not at all familiar	
7. What is your level of knowledge and skills in the technical aspects of your practice?					
(1) High proficiency	(2)	(3) Medium proficiency	(4)	(5) Low proficiency	
RISK FACTORS INFLUENCED BY REGULATORY LEARNING					
8. How familiar are you with the regulations and standards governing you as a registrant of Engineers and Geoscientists BC (e.g., <i>Professional Governance Act</i> , regulations, Bylaws, standards of competence, quality management requirements, and professional practice guidelines)?					
(1) Very familiar	(2)	(3) Somewhat familiar	(4)	(5) Not at all familiar	
RISK FACTORS INFLUENCED BY COMMUNICATIONS AND LEADERSHIP LEARNING					
9. What is the proficiency of your verbal and oral communication skills in relation to the needs of your role?					
(1) High proficiency	(2)	(3) Medium proficiency	(4)	(5) Low proficiency	
A: Total Likelihood Score (1-45)					
B: No. of Questions Answered (1-9)					
Average Likelihood Score (A/B)					
Round any decimal to the nearest whole number and use on Table B-1.					

CONSEQUENCE(S) OF FAILURE: Answer as many of the following questions that are relevant to you about the consequence of errors in your practice, then determine the consequence score based on the average scoring of your responses.

					SCORE
10. How many people would be directly affected by a failure in your practice?					
(1) None	(2)	(3) Some	(4)	(5) Many	
11. How serious would the impacts be on those people from a failure in your practice?					
(1) Not serious	(2)	(3) Moderately serious	(4)	(5) Very serious	
12. How serious/how large would the damage to the environment be if there was a failure in your practice?					
(1) Not serious/ no damage	(2)	(3) Moderately serious/ some damage	(4)	(5) Very serious/ major damage	
13. How serious/how large would the damage to property be if there was a failure in your practice?					
(1) Not serious/no damage	(2)	(3) Moderately serious/ some damage	(4)	(5) Very serious/ major damage	
C: Total Consequence Score (1-20)					
D: No. of Questions Answered (1-4)					
Average Consequence Score (C/D)					
Round any decimal to the nearest whole number and use on Table B-1.					

USE THE RISK MATRIX IN TABLE B - 1 ABOVE: Based on these questions and any other practice-specific risks that you may have identified, what is your risk rating?

Low	Moderate	High	Very High
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ADD ANY COMMENTS THAT SUPPORT YOUR RATING: For example, you may want to list additional factors not captured in these questions or explain the reasoning behind your scoring.