

2015

CONTINUING COMPETENCE PROGRAM FRAMEWORK



Association of
Registered Nurses
of Newfoundland
and Labrador



This Regulatory Document was approved by ARNNTL Council in 2015. (Revised October 2016)

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Preamble

Through the [Registered Nurses Act](#) (2008), the Association of Registered Nurses of Newfoundland and Labrador (ARNNL) has the legislated mandate to regulate nursing practice in NL in the interest of the public. Thus, ARNNL is responsible for promoting safe, competent, ethical and compassionate care by registered nurses (RNs) and nurse practitioners (NPs) throughout their career. ARNNL through the [Registered Nurses Regulations](#) (2013) Section 17 is granted authority such that: "all members shall complete a continuing competency program as required by the council; the council shall conduct regular audits of the members' participation in the continuing competency program; and members shall provide all information requested in the conduct of the audit." [The Standards of Practice for Registered Nurses \(2013\)](#) indicate that "the registered nurse assumes primary responsibility for continuing competence". [The Standards for Nurse Practitioner Practice in Newfoundland and Labrador \(2013\)](#) indicates that "the NP participates in continuing competence and lifelong learning."

This revised framework continues to support the beliefs and guiding principles about continuing competence and continuing competence programs previously outlined in the original 2009 ARNNL Continuing Competence Program (CCP) Framework. While the continuing competency program components (self-assessment, learning plan, and evaluation) remain consistent with the previous framework, it is updated with respect to the current RN/NP Standards, the [Registered Nurses Regulations \(2013\)](#), and the new audit process. The beliefs and guiding principles however remain as follows:

1. The nursing profession as a whole, through its professional and self-regulatory organizations, promotes the advancement of nursing practice, identifies standards of practice, and promotes professional development.
2. Registered nurses are competent, self-regulating professionals and are committed to life-long learning.
3. Continuing competence is essential to professional nursing practice. It promotes good nursing practice, assists in preventing poor practice, and contributes to the quality of nursing practice and best possible client outcomes.
4. Competence is continually maintained and acquired through reflective practice, life-long learning, and integration of learning into nursing practice.
5. The individual registered nurse has a professional obligation and the primary responsibility for maintaining and continually acquiring competence.
6. Maintaining and continually acquiring competence benefits from support from others, including colleagues, employers, professional and regulatory nursing organizations, and government.
7. An individual's ability to continually maintain, acquire or demonstrate competence is influenced by the practice setting. Continuing competence can be facilitated or hindered by the environment in which individuals practice.
8. Nursing colleagues, through their normal commitment to their profession and to one another, support each other in demonstrating, developing, and maintaining competence.

(CNA, 2000)



RN Regulations (2013) and the Continuing Competence Program Requirements

Section 17 & 12 (1) (c) of the [Registered Nurses Regulations \(2013\)](#) require completion of the CCP program for all RNs/NPs applying for a renewal of a license to practice.

- Each and every RN and NP applying for license renewal to practice nursing in NL must meet the mandatory CCP requirements for the preceding licensure year.
- RNs/NPs who have been on extended leave (e.g. maternity, sick or disability), or currently hold a non-practicing membership and are applying for renewal of a practicing license are also required to meet CCP requirements for the preceding licensure year.
- Lapsed ARNNL members seeking re-licensure with ARNNL are also required to meet CCP requirements should they seek re-licensure. Lapsed ARNNL members who have successfully completed CCP requirements in another province/territory or country for the licensure year immediately preceding the year in which he/she is seeking an RN or NP license will be considered to have successfully completed CCP requirements for that licensure year.
- RNs/NPs seeking initial registration and licensure and who have successfully completed CCP requirements in another province/territory or country for the licensure year immediately preceding the year in which he/she is seeking an RN or NP license will be considered to have successfully completed CCP requirements for that licensure year are not required to meet ARNNL's CCP requirements. However, they are required to meet ARNNL CCP requirements upon licensure renewal.
- RNs/NPs are required to keep all CCP documentation for a two year period.
- New graduate nurses seeking initial registration and licensure with ARNNL are not required to meet ARNNL's CCP requirements, however they are required to meet ARNNL CCP requirements upon licensure renewal.

Continuing Competence Program Licensure Renewal Requirements for RNs/NPs

RNs are required to:

- ✓ complete and document a self-assessment using the 2013 ARNNL Standards of Practice for Registered Nurses;
- ✓ identify at least one standard/indicator to be strengthened over the upcoming licensure year;
- ✓ develop and document a learning plan for the RN standard/indicator;
- ✓ evaluate and document the effects of their learning completed over the licensure year (some of the learning completed must relate back to learning goals);
- ✓ participate in a minimum of 14 continuous learning (CL) hours in the previous licensure year (April 1st and March 31st), one-half of these CL hours must be activities that are categorized as formal continuous learning activities (Appendix B); and
- ✓ maintain documentation of verification of formal hours (e.g. CCP tracking forms, certificates, attendance records, etc.)



NPs are required to:

- ✓ complete and document a self-assessment using the 2013 Standards for Nurse Practitioner Practice in Newfoundland and Labrador;
- ✓ identify at least two NP standards/indicators to be strengthened over the coming year;
- ✓ develop and document a learning plan for the NP standards/indicators;
- ✓ evaluate and document the effects of their learning completed over the licensure year (some of the learning completed must relate back to learning goals);
- ✓ participate in a minimum of 14 continuous learning (CL) hours in the previous licensure year (April 1st and March 31st), one-half of these CL hours must be activities that are categorized as formal continuous learning activities (Appendix B); and
- ✓ maintain documentation of verification of formal hours (e.g. CCP tracking forms, certificates, attendance records, etc.)

Continuing Competence Program Components

Self-Assessment

Self-Assessment: RNs are required to complete an assessment using the 2013 Standards of Practice for Registered Nurses while NPs are required to utilize the 2013 Standards for Nurse Practitioner Practice in Newfoundland and Labrador. All RNs and NPs are to assess their practice by reflecting on their current role and practice-setting. Through self-assessment the RN/NP will be able to identify strengths and areas they would like to strengthen.

Reflection: Reflection provides RNs with an opportunity to review the results of their self-assessment and to consider new/emerging trends/issues that influence or may influence their practice. Through reflection, the RN/NP will make a decision about their learning focus for the coming year. All RNs must select at least one ARNNL standard/indicator as the focus of learning. NPs must select at least two NP standards/indicators as the focus of learning. NPs are registered nurses with advanced educational preparation and experience who possess and demonstrate the competencies to autonomously diagnose, order, and interpret diagnostic tests, prescribe pharmaceuticals and perform specific procedures within their legislated scope of practice (Canadian Nurses Association, 2006). Thus, NPs are required to select at least two NP standards/indicators.

Developing and Implementing Your Learning Plan

Learning Plan: The RN/NP develops a learning plan(s) for the coming year to strengthen professional performance in regard to the identified standard/indicator(s). It is important to carefully consider the following as they create and implement a learning plan(s):

- The RN's/NP's learning plan is carried out during the coming licensure year. The RN/NP must ensure that some of their learning (CL) relates back to their learning plan. As the plan is implemented, it will be acknowledged that sometimes unexpected events happen which may require the RN/NP to rethink the plan. Perhaps there is an unexpected change in the services provided in the practice environment or in their role which precipitates another ARNNL standard/indicator rising to a higher priority level. In these situations RNs and NPs can rethink, revise, and implement the revised learning plan.
- RNs/NPs are required to declare on renewal of a practicing license that they have completed ARNNL's CCP self-assessment, learning plan and evaluation, and that they have participated in a minimum of 14 continuous learning (CL) hours in the preceding licensure year. (A minimum of 7 hours must be formal learning).



The following criteria apply to CL hours:

- One clock hour of learning is equal to one CL hour.
- ARNNL authorization of an activity is **not** required.
- A continuing education activity which has been repeated during the reporting licensure year, may be counted only once as part of the total number of CL hours required for licensure renewal for that year.
- Completed learning activities must fall within the licensure year (April 1st to March 31st).

Each RN/NP is required to maintain their own personal records pertaining to their learning plan and CL hours.

Evaluation

RNs and NPs continuously evaluate the effects of their learning. Evaluation focuses on how the results of their learning apply and impact their nursing practice to create a positive difference in nursing outcomes of care/ service. On ARNNL's CCP evaluation forms, the RN and NP evaluate their learning activity and its impact on their nursing practice.

RN Regulations (2013) and Licensure: Failure to Complete Continuing Competence Program

RNs/NPs who fail to complete the CCP will see an impact on his or her licensure:

- The RN/NP will be renewed a license but with conditions and provided up to 90 days or by the last day of the licensure year the license was issued to complete the program and to submit documentation confirming completion of all program components (self-assessment, learning plan, evaluation and 14 continuous learning hours).
- RNs/NPs who do not complete and submit confirmation of program completion within the 90-day timeframe or by the last day of the licensure year the license was issued will have their practicing license reverted to non-practicing. Non-practicing members are not permitted to practice nursing or to use the title "RN" or "NP" until such time as he/she provides the requested documentation confirming the CCP program has been completed.
- ARNNL's website Member Search will be updated to reflect the status change to non-practicing and the employer(s) will be notified.

Continuing Competence Program Audit

Section 17 (2) & (3) of the Registered Nurses Regulations (2013) state that "The council shall conduct regular audits of the members' participation in the continuing competency program" and that "members shall provide all information requested in the conduct of the audit."

Annually ARNNL will audit up to a select percentage (e.g. 5%) of practicing RN members and up to a select percentage (e.g. 5%) of practicing NP members to monitor compliance with the CCP program. Each year a stratified random sample of members will be chosen for the audit process. Others may be audited as deemed appropriate. Members will be notified regarding inclusion in the audit. RN/NP selection criteria have been identified for the random sample to ensure key areas/groupings are represented (e.g., acute, community, long term care, education, administration, self-employed RNs and NPs). RNs/NPs can be chosen for the audit annually as participation in the audit process for a licensure year does not exclude the member from being included in the audit in the next licensure year.



The audit will be conducted by volunteer RNs and NPs of the ARNNL Advisory Committee on Continuing Competence and volunteer RNs/NPs auditors. There will be an annual call for CCP volunteer auditors.

The committee members will anonymously review all CCP documentation submitted utilizing a standardized audit tool. The audit tool will be used to monitor: evidence of participation in the continuing competence program for the preceding licensure year (14 hours - including verification of at least seven formal hours); linkages between the standards/indicators, learning plan goal(s) and learning hours; and evidence of completion of all sections of the CCP documents, Professional Development Learning Plan and Professional Development Evaluation Form. RNs and NPs are not required to submit the self-assessment CCP form.

Audited members who demonstrate that CCP requirements were met will be notified of their successful completion of CCP requirements via email. Members who submit CCP documentation that does not demonstrate that the audit criteria were met will be contacted by an ARNNL nursing consultant for further education and follow-up via email. Members who do not comply and fail to submit the required CCP documentation are in breach of the RN Regulations (2013) and will be referred to the Director of Regulatory Services/Designate.

Resources for RNs and NPs

The CCP program is a program that assists RNs and NPs to continuously improve their knowledge and practice. RNs/NPs can visit ARNNL's website (www.arnnl.ca) to obtain the most current versions of the RN and NP CCP forms. There are also resources available on the ARNNL website to assist RNs/NPs in completing the CCP process. RNs and NPs can also connect with ARNNL staff for assistance in completing the CCP process.



Appendix A

DEFINITIONS

The ARNNL CCP framework supports the following definitions contained in the Canadian Nurses Association (CNA) document A National Framework for Continuing Competence Programs for Registered Nurses (2000).

Competence: The ability of a registered nurse to integrate and apply the knowledge, skills, judgment, and personal attributes required to practice safely and ethically in a designated role and setting.

Competencies: The specific knowledge, skills, judgment and personal attributes required for a registered nurse to practice safely and ethically in a designated role and setting.

Conduct Deserving Of Sanction: The ARNNL definitions of conduct deserving of sanction were approved by Council in October 2013 and are set out in Article X of the ARNNL By-Laws. https://www.arnnl.ca/sites/default/files/Examples_of_Conduct_Deserving_of_Sanction_Sept_2015.pdf

Continuing Competence: The ongoing ability of a registered nurse to integrate and apply the knowledge, skills, judgment and personal attributes required to practice safely and ethically in a designated role and setting. Maintaining this ongoing ability involves a continual process linking the code of ethics, standards of practice and life-long learning. The registered nurse reflects on his/her practice on an ongoing basis and takes action to continually improve that practice.

Continuing Competence Program: A program that focuses on promoting the maintenance and acquirement of the competence of registered nurses throughout their careers.

Competence Assessment: An external evaluation of the registered nurse's ability to integrate and apply the knowledge, skills, judgment and personal attributes required to practice safely and ethically in a designated role and setting.

Lapsed Member: A lapsed member is an individual who did not renew a practicing membership (i.e. issued a license) or non-practicing membership with ARNNL for a period of greater than 1 membership year. (Members who do not plan to renew a practicing license or non-practicing membership should 'Resign your current membership' with ARNNL, through <https://MyARNNL.ca>, to avoid lapsed member status.)



Appendix B

TABLE 1:
Examples of Continuous Learning Activities (not all inclusive)

<p>FORMAL:</p> <p>ACADEMIC</p> <ul style="list-style-type: none"> - University programs/courses - Post-basic diplomas/courses <p>SPECIALTY CERTIFICATION</p> <p>COURSES LEADING TO CERTIFICATE OR DIPLOMA IN FOLLOWING AREAS OR ROLES:</p> <ul style="list-style-type: none"> - Wound care - QI/Risk Management - D. M. Wylie Nursing Leadership Institute - Diabetes Educator - Lactation Consultant - MUN Nursing Leadership <p>CONFERENCES/TELECONFERENCES/SEMINAR/WORKSHOPS</p> <ul style="list-style-type: none"> - ARNNL & RNUUNL Conferences - ARNNL Tuesday Education Sessions⁶ - RNUUNL Leadership Courses <p>EMPLOYER PROVIDED Continuing Education</p> <ul style="list-style-type: none"> - Employer Orientation Program - ACLS, Safety Education, etc. <p>PROFESSIONAL COMMITTEES</p> <ul style="list-style-type: none"> - CNA Committee - Professional Practice Councils - ARNNL Committees - ARNNL Workplace Representative Program - Special Interest Group Committees 	<p>PROGRAM/UNIT BASED ACTIVITIES</p> <ul style="list-style-type: none"> - Nursing Rounds - Journal club - Modules (central line devices, foot care, and various other clinical focused modules) - Short in-services (e.g., new equipment, privacy). - Clinical skills/Education Day <p>PRECEPTORSHIP AND OR MENTORSHIP</p> <ul style="list-style-type: none"> - Basic Nursing Student - RN or NP Colleague <p>PUBLISHING AN ARTICLE IN A PROFESSIONAL JOURNAL</p> <p>SELF-DIRECTED (INFORMAL):</p> <ul style="list-style-type: none"> • CONDUCTING RESEARCH. • VOLUNTEER ACTIVITIES - Presentations on health related topics outside employment such as to seniors groups on medication use; cancer screening. - Organizing Health Promotion Activities. • INDEPENDENT LEARNING - Reading professional journals to enhance patient care outcomes - Searching reputable internet sites, such as nurseone.ca (for patient teaching materials, best practices, e-therapeutics) - Researching a topic to enhance personal and professional performance (for example, stress/time management).
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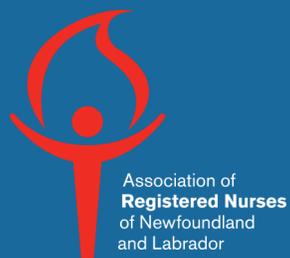
⁶ARNNL Tuesday Education Sessions can be used as formal continuous learning when members participate in live sessions. Viewing archived teleconferences/webinars is considered independent learning and can be counted towards self-directed (informal) learning hours.



References and Resources

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