

Council Notes

The SRNA 13-member Council met for two days, November 6 and 7, 2018. The following is an overview of the discussions that occurred and decisions that were made.

Executive Director Update

In September 2018, the SRNA launched and implemented the 2018-2020 Strategic Plan.

Jayne Naylen Horbach, SRNA Interim Executive Director presented her report to Council, highlighting what has been happening in all aspects of operationalizing the strategic plan in alignment with the ENDS. Some of the updates included:

- The audit of the Continuing Competency Program (CCP) conducted in May of 2018 surveyed 245 randomly selected members. With 38 responses, the survey results indicated some possible solutions for problem areas with the program:
 - An online CCP management program
 - An education points system
 - A sample learning plan for member reference
- An update on the investigations process, including active cases, cases awaiting decisions, and the triaging process. There was also a discussion surrounding the number of open investigations. The updates included:
 - There are currently 78 active cases
 - 62 cases are awaiting initial decisions
 - August: 10 new cases
 - September: 8 new cases
 - October: 9 new cases
 - 8 decisions were made in October 2018
 - There is a triaging process that ranks the cases from #1-#4, critical, emergent, urgent and less urgent
 - It appears there is an increase in investigations and complaints, and some possible explanations include:
 - The amalgamation of all health regions into one health authority
 - More awareness of what's acceptable and not acceptable
 - A renewed standard of managing our profession
 - The investigation's team has put together a document that breaks down the status of each case, any barriers or complications, and estimated timelines for completion

- In December 2018, there will be an external review of the SRNA by the Professional Standards Authority out of the United Kingdom to assess the SRNA's processes, policies and decisions against an adapted version of the Standards of Good Regulation. This review will include an analysis of the SRNA's statutory function in relation to the complaints, investigations and discipline process.
- An update on the work completed with the Canadian Council of Registered Nurse Regulators (CCRNRR) over the past few months. Membership of CCRNR allows for the sharing of resources between jurisdictions, and this has shaped how the SRNA builds new policies, bylaws and regulations, specifically surrounding the practice network meeting for the legalization of cannabis and the practice working group for the RN(NP) regulation model.
- An update and review of the proposed Canadian Examination for Baccalaureate Nursing (CASN). The Canadian Patient Safety Institute, National Interprofessional Education Group, Infection Prevention and Control Canada, and Canadian Indigenous Nurses Associations were consulted for the exam's methodology. The exam assesses components of CASN's *National Nursing Education Framework* for baccalaureate education, is voluntary, bilingual and provides national certification. The exam is computer-based but not computer-adaptive and is subject to pilot testing.
- An NNAS update including the number of internationally educated nurses applying to NNAS and a discussion surrounding the application process.
- An update on the registration renewal process for the 2019 licencing year and the applications used:
 - 94% of SRNA members had registered by Council update
 - Some employers have changed processes for licence renewal if on maternity leave, so additional explanations and support was provided to those members
 - While overall the renewal process went well, there were some issues encountered with the database, Aptify, used to facilitate registration.
- A report and update from the professional practice team, outlining key themes from inquiries, an introduction to the new practice call database, RN(NP) practice updates, and the Workplace Representative and Educator Education Day.
- An update on the SRNA Committees and the work being done to expand representation and educational opportunities.
- An update on the Entry Level Competencies Consultations that took place across the province in the fall of 2018, as well as other conferences and meetings attended by the SRNA staff.
- An update on the social media strategy and media coverage over the last few months.
- An update on SRNA employee and staff engagement, the healthy workplace project, and the Stratford compensation and job description review.

Executive Limitations Policy Monitoring

Council affirmed the following policies are in compliance:

Policy 2.3 Financial Management – deferred to February meeting

Policy 2.4 Protection of Assets – deferred

Policy 2.6 Compensation and Benefits

Policy 2.8 Preparation of Position Statements

Policy 2.9 Practice of Nursing Standards

Policy 2.10 Canadian Council of Registered Nurse Regulators (CCRN)

Policy 2.13 External Program/Organizational Review

ENDs Policy Monitoring

Council affirmed the following policies are in compliance:

Policy 1.3 Partners in the Health Care System

Policy 1.3.1 Articulation of Roles

Policy 1.3.2 Advocating for Evidence-informed Practice

Policy 1.3.3 Influencing Public Policy

Report from the President

President Joanne Petersen reported on her activities since the last Council meeting in August. Joanne represented the SRNA at several conferences and meetings. In late September, Joanne joined the CNA meetings which included orienting new board members, starting the strategic planning process and reviewing the current membership models since the historic bylaw to expand the membership to the family of nursing was passed at the AGM. In mid-October, Joanne had a teleconference with SAPLN Chair Janice Wagner and RPNAS President Donna Dyck to discuss strategies moving forward, professional development within the nursing councils and counting down terms. She also attended the Lutheran Parish Nurses International study tour, guest lectured a class at the U of S Regina campus, attended the Health Quality Council QI PowerHour WebEx regarding reducing ER wait times, spoke at the SRNA WPR Educator Day in Saskatoon, brought greetings to the Collaborative Nurse Practitioner Program (CNPP) and the Saskatchewan Collaborative Bachelor of Science in Nursing (SCBCsN) Program graduation in Regina, and chaired the meetings of the SRNA Executive Director Search Committee.

Discussion with the RN(NP) Advisory Committee

The RN(NP) Advisory Committee met with Council the first day of meetings to bring forward recommendations and requests regarding title, licensing and SRNA bylaws. The discussion focused on current state of RN(NP)s in the province, the continuous broadening of scope of practice based on evidence-informed decisions, clinical practice hours licensure requirement, and admitting and discharging in long-term care.

Linking with Students and New Grads

Fred Entz, RN, a new nursing graduate, presented his recommendations on how the SRNA and Council can better link with nursing students and newly graduated nurses. He surveyed nursing students and new grads to gain a perspective on the current situation in order to solve real time needs in real time ways. The compiled list of recommendations for both groups included in person and virtual presentations from the SRNA, a focus on building relationships through mentorship, and increased education and engagement opportunities. Moving forward, the SRNA will be putting together a strategy to best support and fulfill these recommendations.

Report on the Canadian Nurses Protective Society (CNPS) Activities

David Kline, Board of Directors member with the Canadian Nurses Protective Society (CNPS), updated Council on Saskatchewan nurses' coverage, incident report and management of risk in the nursing practice. Some of the specific updates and reminders included:

- Licensed Practical Nurses (LPNs) are now covered through CNPS.
- Registered Psychiatric Nurses (RPNs) will soon be eligible for coverage in British Columbia.
- In Saskatchewan, paying the CNPS fee is mandatory.
- There was a CNPS fee increase last year.
- Every nurse in Canada is covered for legal proceedings, including claims and civil proceedings (up to \$10 million per claim), criminal investigations and prosecutions (up to \$1 million per occurrence), statutory offences (up to \$1 million per occurrence), witness appearances, and general legal assistance.
- 2017 saw an increase for claims, while 2018 claim numbers decreased.
- Supplementary coverage is available for \$150. The supplementary coverage includes legal advice and support. Currently, 2640 nurses across Canada have this coverage.
- CNPS is discussing greater representation on the Board of Directors, including LPNs, NPs, public representatives.

SRNA Document & Content Management Framework Recommendation

SRNA staff members Donna Marin, RN, and Barbara McDonald, RN, proposed a document clarifying the definitions of the types of SRNA documents including Council Policies at the second day of Council meetings. They proposed to standardize the definition of Council Policy to provide clear direction to staff regarding use and applicability of Council Policy. They commented that standardizing the definition will also clarify the process for communicating Council Policy and therefore increasing transparency. The definition and description document include a breakdown of the document type, description of the document, authority responsible, recommended SRNA consultation, required communication with Council and any other notes.

Council carried the proposed definitions presented and moving forward all council policies will be posted to the SRNA website.

Meeting with the Deputy Minister of Health and Chief Nursing Officer for the Ministry of Health, and Vice President Integrated Urban Health and Chief Nursing Officer for the Saskatchewan Health Authority

Max Hendricks, the Deputy Minister of Health, Mary Martin Smith, the Chief Nursing Officer for the Ministry of Health, along with Sharon Garratt, Vice President Integrated Urban Health and Chief Nursing Officer for the Saskatchewan Health Authority (SHA) joined Council for the last day of meetings to discuss issues affecting registered nurses in the province, including mentorship, RN(NP) utilization across the province, the TRC Calls to Action and other policy work. The Deputy Minister of Health brought updates regarding the creation of the Saskatchewan Health Authority, the key priorities for the region, shifting the patient experience, current challenges facing the SHA, and standards for scope of practice. The collaborative work between the various nursing practice organizations was reviewed, and reconciliation and mentorship were strong themes throughout the discussions.