



Registered Nurses Association
of the Northwest Territories
and Nunavut

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Registration Policy

Policy Description: Continuing Competence Plan
(CCP) Audit

Policy Number: R12

Effective Date: April 25th, 2015

Signature

Review Date: April 2018

New Policy _____

Revision: Partial X Complete _____

Applies To: All RNANT/NU members that have had their Continuing Competence Plan (CCP) requested by RNANT/NU for audit purposes.

Purpose: This policy outlines the audit process of the continuing competence program that will occur on an annual basis. This policy is in addition to Registration Policy R11: Continuing Competence Plan (CCP).

Policy:

1. Audit Frequency

Ten percent of the active RNANT/NU membership (RNs and NPs) will be audited annually.

2. Audit Process

- a) The Registrar will notify ten percent of members by email letter that they have been randomly selected to submit their Continuing Competence Plan (CCP) to RNANT/NU.
- b) Members will be given 60 days after notification of being randomly selected to submit their CCP from the previous year.
- c) Members must submit their CCP to RNANT/NU as per Registration Policy R11: Continuing Competence Plan.
- d) CCPs will be reviewed by the Registration Committee for content, completeness and adherence to the RNANT/NU Standards of Practice (2014) using an audit assessment tool.
- e) All CCPs will be returned to the registrant with written feedback from the Registration Committee and/or Registrar.
- f) An audit record will be noted on the member's file indicating the date and outcome of the audit.
- g) If a member does not submit a CCP as requested by RNANT/NU as per 1, the application for registration/renewal will be denied.
- h) If a submitted CCP is deemed unsatisfactory by the Registration Committee or the Registrar, the Registrar will provide the member with written feedback and may request revision and/or additional information that must be provided in 60 days.
- i) Audited members who are required to resubmit their CCP may request assistance from the Registrar and/or a member of the Registration Committee.

Conditions and Exceptions:

none



Authority and Accountability:

This policy is issued under the authority of the RNANT/NU Board of Directors and as governed by the NU Nursing Act (2004), Section 2; NT Nursing Profession Act (2004), Section 29; RNANT/NU Bylaw 2, Section 5 (4) (c) and Bylaw 4. The Board of Directors has the authority to revise this policy as required.

The Director of Regulatory Services and Policy and the Registration Committee are accountable to the Board of Directors, and ultimately to the membership for the implementation of this policy and may delegate any related administrative tasks.

History:

This policy replaces the former policy:

R12: Professional Development Plan (PDP) Audit, last revised in May 2010.