



QUALITY PRACTICE
A RESOURCE FOR EMPLOYERS OF NURSES

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Helping employers to protect the public

Whether you want to check the registration status of your nurses, or identify an illegal practitioner, the College's AAVR system is a fast and convenient way to confirm a nurse's eligibility to practice in Ontario.

For more information, see page 4 or visit the Employer section at www.cno.org.

Check out
CNO's Automated
Annual Verification
of Renewal

College responds to HPRAC recommendations

The Health Professions Regulatory Advisory Council (HPRAC) has proposed extensive changes to the *Regulated Health Professions Act* (RHPA), one of which may significantly impact employers' mandatory reporting obligations. The College expressed its concern about these changes. At the time of writing, there had not been a response by the Ministry to the recommendations.

Under the current RHPA, employers must report to the College the names of nurses who have been terminated for professional misconduct, incompetence and incapacity. It is also mandatory to report nurses suspected of sexual abuse. Employers are allowed to address independently those practice issues that don't result in termination such as minor breaches of standards or hospital policies.

Under HPRAC's proposal, employers would be obligated to report all incidents of professional misconduct, incompetence and incapacity regardless of outcome. It would also require regulated health professionals to report other professionals to their appropriate college in these circumstances.

Included in its response to the Ministry, the College expressed the following concerns about expanding mandatory reporting requirements.

- The mandatory reporting of minor events may undermine client safety and public protection because the fear by members of disciplinary action being taken by the College could impede the reporting of incidents and adverse events.
- The College's ability to efficiently address serious matters may be curtailed because it will have to divert much of its resources to handling the increased volume of reports on minor issues.
- Work relations and collaborative practice between health care professionals may be compromised. Given the inherent power imbalances between certain health care professions, there is a potential for mandatory reporting to be abused.
- The possibility of being reported for minor incidents may demoralize all nurses, especially recent graduates.
- Mandatory reporting could compromise the employers' ability to appropriately deal with certain conduct, practice and incapacity issues.

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Proposed Act to aid international applicants

The Ontario government has proposed a bill that may make registration quicker and easier for some internationally educated nurses, doctors and other regulated professionals.

If passed, the *Fair Access to Regulated Professions Act* (commonly called “Bill 124”) will give the Ontario Ministry of Citizenship and Immigration the authority to review the application processes for all regulated professions. Regulatory bodies like the College will be required to provide information on registration and application procedures, and to inform applicants of the qualification documents they need and how long the process will take. The College already fulfils many of these requirements, as per the *Regulated Health Professions Act, 1991*, and has pursued philosophies of openness and transparency in its registration process.

The proposed Act contains new requirements. If the Act comes into affect, the College will need to submit a review of its registration practices every year and have its registration practices audited every three years at its own

expense. A new Fairness Commissioner will be appointed to ensure college compliance and provide advice to the government on registration processes.

The College has provided the Minister with comments and recommendations on policy and technical issues in the bill and requested more information about the proposed audits. Of concern is the authority of the Fairness Commissioner that, as presented, will encroach on the College’s ongoing ability to set entry-to-practice requirements. Currently, applicants who are not accepted by the College can appeal to an independent organization, the Health Professions Appeal and Review Board (HPARB). In these cases, HPARB reviews applications and confirms the College’s decision, recommends a re-evaluation of the application or requests that the applicant be registered.

The bill was first presented in the Ontario legislature in June and, at the time of writing, a second reading was scheduled for September. The bill could become law as soon as the new year.

Changes to *Decisions About Procedures and Authority* practice standard

In May 2006, a regulation under the *Nursing Act, 1991*, was amended to allow RPNs in Ontario to initiate certain controlled act procedures. These amendments necessitated changes to the College’s *Decisions About Procedures and Authority* practice standard, which was published in 2005.

The College has updated the standard and re-titled it *Decisions About Procedures and Authority, Revised 2006*.

A copy of the revised standard has been included with this issue. Additional copies can be downloaded from the College’s website at www.cno.org.

For more information on the legislative changes, as well as a scenario that illustrates RPN initiation, refer to the June 2006 issue of *The Standard*, which is available on the College’s website.

HPRAC

recommendations

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The College recommended that mandatory reporting be limited to issues of misconduct, incompetence and incapacity that are likely to expose members of the public to significant risk of harm or injury, or in cases in which matters are not being appropriately addressed in the practice setting.

For more on the College’s response to HPRAC’s recommendations, see the September issue of *The Standard*.

Delegation regulation proposed for nurses

What must be in place for safe and appropriate delegation to nurses? If you have struggled with this question, you're not alone. The *Regulated Health Professions Act, 1991*, (RHPA) doesn't outline the conditions for delegating or receiving delegation of controlled acts. Ontario's 23 regulated health care professions can govern the process of delegation through their regulations according to the RHPA.

The College is proposing a regulation that will define parameters around delegation based on existing practice standards and guidelines. Feedback from nurses and other stakeholders is being requested. If you received the fall issue of *The Standard*, you'll find a copy of the proposed regulation with the magazine, or you can go online to www.cno.org to access the document.

Regulating the conditions around delegation will let nurses know what needs to be in place for safe and appropriate delegation. It will also provide increased access to care, as there will be almost no limits on who can delegate and which controlled acts can be delegated, as long as the conditions of the regulation are met. (The exception is the delegation of prescribing and ordering the application of energy by RN(EC)s.) If the regulation is passed by the government, the components for a safe delegation will be legally enforceable. This means that a nurse is held accountable for the decision to delegate or accept delegation, and for the process that takes place to ensure delegation is in the client's best interest.

Providing clarity for RN(EC)s

To help Acute Care Nurse Practitioners (ACNPs) contribute to the health care system to their full potential, the College published *Proposed Amendments to the Controlled Acts Regulation and Registration Regulation for Members of the Extended Class*, a copy of which was circulated to members with the June issue of the *The Standard*.

The College is proposing to regulate four specialties in the Extended Class as NP – Adult, NP – Paediatrics and NP – Anaesthesia. Currently, only NP – Primary Health Care is registered in the Extended Class. Despite their advanced education, ACNPs are currently only legislated to access the three controlled acts available to all RPNs and RNs. As members of the Extended Class, ACNPs would have the authority to initiate and perform the additional controlled acts legislated to RN(EC)s.

This new regulation proposal also references the *Proposed Practice Standard: Performance of Controlled Acts by Nurses Practitioners*, which clarifies practice expectations for RN(EC)s when performing controlled acts. This practice standard is unlike any currently existing standard for nursing in the province. It differs from previous standards in appearance, content and language because it has the force of a regulation.

In September, the College's Council accepted the proposals, and a copy of *Proposed Practice Standard: Performance of Controlled Acts by Nurse Practitioners* was included with the fall issue of *The Standard* for stakeholder feedback. The document is also available at www.cno.org, and feedback received by the College will be presented at Council in December.

Member suspension

The Certificate of Registration of Eulalee Lowe (Registration No. 0108043) is suspended by order of the Executive Committee of the College of Nurses of Ontario pending a discipline hearing.

Membership renewal 2007

By early November, Ontario's nurses will have received their 2007 Annual Membership Renewal (AMR) forms. In addition, membership renewal is now available online for active members in the General and Extended Class. Members will be able to complete the form and pay fees at www.cno.org starting October 31.

Also note that, with the decrease in the GST, the fee for General and Extended Class registration has been reduced to \$123.83 (GST included).

The College asks employers' assistance in urging nurses to complete and return their AMR forms promptly. Doing so helps ensure that your employees are not suspended, and that your nursing staff has paid their annual fees and are entitled to practise. The College has set an earlier suspension date for 2007 than usual. Suspensions will be issued on April 10, 2007.

The College's Annual Automated Verification of Renewal (AAVR) program is available to employers. This program will help you efficiently confirm the registration status of the nurses practising in your workplace. Employers subscribe to the AAVR and submit electronic files containing the registration numbers and names of the nurses they employ. The program checks the registration numbers to confirm membership renewal status. It will also identify registrations in the Temporary or Retired Classes, suspensions and revocations, and any terms, limits or conditions on a nurse's practice.

More information about the AAVR program and membership renewal can be found at www.cno.org in the Registration and Employer sections.

Ask CNO: Police access to information

Q My hospital has developed a new procedure that allows police to complete a form to request personal health information about clients who come to our emergency department. Can police access this information without a warrant or subpoena?

A Under certain circumstances, yes. The *Personal Health Information Protection Act, 2004*, (PHIPA) permits hospitals to develop a procedure for releasing information to the police. By creating such a procedure, your hospital has formalized the process for giving information to the police during an investigation. The responsibility for the decision to disclose information requested by police lies with the hospital. As an employee of the hospital, you are not breaching College practice standards if the hospital's procedure complies with PHIPA and you are asked by the facility to provide personal health information to police.

Your hospital's procedure for police accessing information should include criteria regarding the circumstances under which the information is provided. For example, the police need to demonstrate that the request

is urgent. In addition, the hospital needs to appoint a decision-maker to handle urgent requests from police, and this person needs to be clearly identified in the policy. The designated decision-maker must ensure that the information that he or she supplies complies with PHIPA. Of course, this procedure is unnecessary if the police provide a warrant or subpoena.

The custodian does not need a client's consent to disclose health information to the police, but any disclosure procedures must conform to PHIPA. To view the legislation, visit the Information and Privacy Commissioner/Ontario website at www.ipc.on.ca.

We Can Help

Answering your call

Our Customer Service Centre and Practice Consultants answer calls from 0830 until 1700 hrs from Monday to Friday. Call 416 928-0900 (toll-free in Ontario at 1 800 387-5526). Using the automated system, choose your language of preference, and then select option "0" for Customer Service or ext. 2 to speak with a Practice Consultant.

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