

College and Association of Nurses of the Northwest Territories and Nunavut



Category: Registration

POLICY NAME	Continuing Competence Plan		POLICY NO.	R11	
EFFECTIVE DATE	February 13, 2025	DATE OF LAST REVISION	January, 2022	VERSION NO.	4
APPLIES TO Apply group names to define applicable areas of staff.					
All Active Members of CANNN					

VERSION HISTORY				
VERSION	APPROVED BY	REVISION DATE	DESCRIPTION OF CHANGE	AUTHOR
1	Board of Directors	May, 2010	Updated; New Format	Executive Director
2	Board of Directors	January, 2021	Updated	Executive Director
3	Board of Directors	January, 2022	Updated	Director of Regulatory Services and Policy
4	Board of Directors	December, 2024	Updated; New Format	Director Of Quality Practice

PURPOSE

Describe to what and to whom this policy applies.

The *Nursing Profession Act (2023)* of the Northwest Territories, The *Nursing Professions Act (2023)* of Nunavut (The Acts) and CANNN Bylaws require registrants to participate in a Continuing Competence Program. This policy describes what constitutes a Continuing Competence Plan (CCP) acceptable to CANNN as part of its Continuing Competence Program requirements. It applies to all active registrants: Registered Nurses (RN), Registered Psychiatric Nurses (RPN), Licensed Practical Nurses (LPN) and Nurse Practitioners (NP).

POLICY

Competence is defined as the combined knowledge, skills and judgment necessary to meet acceptable standards in the practice of Nursing (Nursing Profession Act, 2023). CANNN's Continuing Competence Program is grounded in the understanding that all registrants are competent and committed to lifelong learning. Registrants are required to develop and complete a CCP by December 31 of each registration year and must identify that they have done so when renewing.

PROCEDURES

The goals of the Continuing Competence Program are to:

1. Provide a process that supports quality nursing care to the public.
2. Support registrants in their professional commitment to lifelong learning and excellence in their nursing practice.
3. Provide an annual demonstration of the nursing profession's accountability to the public.

The Continuing Competence Plan must include:

- a) Identification of Two Learning Goals: the two identified learning goals should be grounded in the professional expectations found in the Code of Conduct (CANN, 2025) and CANN's Standards of Practice. The two learning goals should demonstrate specific, measurable, achievable, relevant and time bound actions that will assist the registrant in maintaining competence through further learning and development of their nursing practice.
- b) Specific Activities: describe two or more specific activities that have been undertaken to meet the learning goals. The document "Continuous Learning Activities Examples" is available on the website and may aid the registrant in developing their CCP. This document is not a complete list of acceptable activities. Other activities may be accepted in consultation with the Director of Quality Practice.
- c) Evidence of Evaluation: the registrant must identify how the learning activity improved, modified and has been implemented into their practice using detailed examples.

If a registrant does not meet these minimum expectations or the submitted CCP does not meet the requirements set by the Director of Quality Practice, registrants will be required to submit a revised CCP. The revised CCP must comply with any remedial requirements directed by the Director of Quality Practice and evidence of having undertaken additional continuing competence activities must be submitted.

Remedial requirements must be completed within the period of time specified by the Director of Quality Practice and at the registrant's own cost. Remedial requirements may include:

- a. Completing specific CCP requirements
- b. Completing additional learning activities
- c. Providing evidence of continued learning and competence
- d. Answering questions regarding continued learning and competence
- e. Submitting to a periodic review and evaluation by the Director of Quality Practice
- f. Reporting to the Director of Quality Practice on specified matters related to the CCP
- g. Any other remedial requirements the Director of Quality Practice considers appropriate.

If a CCP remains below set requirements or is not submitted at all, the Registrar may impose the following conditions on a practice permit:

- a. The registrant practice under supervision

- b. The registrant’s practice be limited to specified professional services or to specified areas of the practice
- c. The registrant refrain from performing specified restricted activities
- d. The registrant refrain from engaging in independent practice
- e. The registrant submits to additional practice visits or other assessments
- f. The registrant report to the Registrar and/or Director of Quality Practice on specified matters on specified dates
- g. The registrant’s practice permit is valid for a specified purpose and time
- h. The registrant be prohibited from supervising students or other health professionals
- i. The registrant’s application for reinstatement/renewal may be denied

TERMS AND DEFINITIONS

Define any acronyms, jargon, or terms that might have multiple meanings.

CONDITIONS AND EXCEPTIONS

Describe exceptions here.

None

AUTHORITY AND ACCOUNTABILITY

List the job titles and business offices directly responsible for the policy.

ROLE	RESPONSIBILITY
CANN Board of Directors	Governed by NT Nursing Profession Act (2023) S.22.(2), NU Nursing Professions Act (2023) S.18, Bylaw 5.2, 5.3. The Board of Directors has the authority to revise this Policy as required.
Director of Quality Practice	The Director of Quality Practice is accountable to the Board for the implementation of this policy and may delegate any administrative tasks as required.