

College of Nurses of the Northwest Territories and Nunavut



Category: Quality Assurance

POLICY NAME	Professional Development Plan Audit		POLICY NO.	Q2	
EFFECTIVE DATE	June 28 th , 2025	DATE OF LAST REVISION	February 13, 2025	VERSION NO.	4
APPLIES TO Apply group names to define applicable areas of staff.					
All active registrants of CNNN, regardless of employment status during the registration year					

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, 2022	Updated	Director of Regulatory Services and Policy
3	Board of Directors	December, 2024	Updated; New Format	Director Of Quality Practice
4	Board of Directors	June, 2025	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 CNNN Bylaws require registrants to participate in a Continuing Competence Program. The Continuing Competence Program will henceforth be referred to as the Quality Assurance Program (QAP). This policy outlines the audit process of the Self-Assessment Questionnaire and Professional Development Plan (PDP). It applies to all active registrants: Registered Nurses (RN), Registered Psychiatric Nurses (RPN), Licensed Practical Nurses (LPN) and Nurse Practitioners (NP) regardless of employment status during the registration year.

POLICY

Ten percent of the active CNNN membership: RNs, RPNs, LPNs and NPs will be audited annually to ensure their Self-Assessment Questionnaires and PDPs align with the requirements outlined in Policy Q1.

PROCEDURES

Audit Process

1. Every January, Self-Assessment Questionnaires and PDPs will be randomly chosen from CNNN's regulatory member management software by the Director of Quality Practice.
2. The Self-Assessment Questionnaires and PDPs will be reviewed by the Quality Assurance Committee for content, completeness and accuracy. The Quality Assurance Committee will use an audit assessment tool that aligns with the PDP requirements outlined in Policy R11.
3. An audit record will be maintained and upon completion of the audit process, the registrant will be informed of the date and outcome of the audit by email.
4. If a Self-Assessment Questionnaire and/or PDP is deemed unsatisfactory by the Quality Assurance Committee, the registrant will be provided with written feedback and a request for revision and/or additional information will be sent by email. The registrant will be given 14 days after the notification email is sent to complete their revisions in CNNN's regulatory member management software and/or provide additional information to the Director of Quality Practice.
5. If a Self-Assessment Questionnaire and/or PDP remain below set requirements or is not completed at all, a registrant's application for reinstatement/renewal may be denied.

CONDITIONS AND EXCEPTIONS

Describe exceptions here.

None

AUTHORITY AND ACCOUNTABILITY

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

ROLE	RESPONSIBILITY
CNNN 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