

# College and Association of Nurses of the Northwest Territories and Nunavut



Category: Registration

<b>POLICY NAME</b>	Continuing Competence Plan Audit		<b>POLICY NO.</b>	R12	
<b>EFFECTIVE DATE</b>	February 13, 2025	<b>DATE OF LAST REVISION</b>	January, 2022	<b>VERSION NO.</b>	3
<b>APPLIES TO</b> Apply group names to define applicable areas of staff.					
All Active Registrants 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, 2022	Updated	Director of Regulatory Services and Policy
3	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 outlines the audit process of the Continuing Competence Plan (CCP). It applies to all active registrants: Registered Nurses (RN), Registered Psychiatric Nurses (RPN), Licensed Practical Nurses (LPN) and Nurse Practitioners (NP).

## POLICY

Ten percent of the active CANNN membership: RNs, RPNs, LPNs and NPs will be audited annually to ensure their CCPs align with the requirements outlined in Policy R11.

## PROCEDURES

### Audit Process

1. A list of active registrants will be pulled from CANNN's regulatory member management software and a random sample will be generated.
2. The Director of Quality Practice will notify the registrants by email that they have been randomly selected to submit their CCP to CANNN.
3. Registrants will be given 30 days after the notification email was sent to submit their CCP to the Director of Quality Practice.
4. CCPs will be reviewed by the Director of Quality Practice for content, completeness and accuracy. The Director of Quality Practice will use an audit assessment tool that aligns with the CCP requirements outlined in Policy R11.
5. An audit record will be noted on the registrant's file indicating the date and outcome of the audit.
6. If a submitted CCP is deemed unsatisfactory by the Director of Quality Practice, the registrant will be provided with written feedback and a request for revision and/or additional information will be sent by email. The registrants will be given 30 days after the notification email was sent to submit their revisions and/or additional information to the Director of Quality Practice.
7. If a CCP remains below set requirements or is not submitted at all, a 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
CANNN 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.