

# The Continuing Competence Program (CCP)

# Self-Regulation: An Introduction

# What does it mean to be regulated?

- Professional regulation is the process of creating, monitoring, and enforcing regulations for the purposes of establishing standards of conduct for the members of a profession.
- Once developed, the standards for a regulated profession create a framework from which the professionals in the profession practice.

# What are Regulations?

- For the nursing profession regulations are:
  - Rules, policies, principles and guidelines which represent safe and competent nursing practice, and;
  - Minimal standard of education, practice, behaviour and conduct which:
    - promote good practice (desired practice);
    - prevent poor practice (practice to avoid),and;
    - intervene when practice is unacceptable (triggers action when practice falls bellow expectation).

# How Regulation Protects the Public

- The primary purpose of regulation is protection of the public.
- Certain professions (such as nursing) perform work of such a nature that if it is carried out in a negligent or fraudulent way or by ill-prepared practitioners, it can be dangerous to the public or contrary to the public interest.
- Regulation means processes are put in place so only individuals who have met the requirements of profession may engage in its practice and those engaged in practice must continue to meet the expected standard of practice.
- The public is protected because only qualified practitioners can enter and remain in the profession.

# The Regulation of Professions

- A profession can be regulated one of two ways: either directly by the government or by the profession itself.

Self-Regulation	Government Regulation
Self-regulation is when the members of a profession <u>create</u> , <u>monitor</u> , and <u>enforce</u> standards of practice and conduct for their <i>own</i> profession.	Governmental regulation is when standards of practice and conduct are <u>created</u> , <u>monitored</u> and <u>enforced</u> by individuals (the government) outside the profession.

- All nurses in Nova Scotia (LPNs, RNs and NPs) are self-regulated.

# Self-Regulation vs Government Regulation

- Although government regulation can be effective, self-regulation of LPNs is preferred in Nova Scotia because the specialized body of practical nursing knowledge positions LPNs to be most appropriate group to develop, monitor and enforce standards for their *own* profession.

# Self-Regulation

- The authority to self regulate was granted to LPNs by the Nova Scotia government through an act of legislation known as the [LPN Act](#).
- The most recent version of the LPN act achieved royal assent in 2006 and the [LPN Regulations](#) were proclaimed in 2006.
- Licensed Practical Nurses (LPNs) have been [self-regulated](#) in Nova Scotia since 1998.



# As an aside.....The LPN Act

- Beyond granting LPNs the privilege of self-regulation, the [LPN Act](#) also:
  - Outlines the professional scope of practice of the LPN in Nova Scotia;
  - Authorizes the creation of the College of Licensed Practical Nurses of Nova Scotia (CLPNNS, or the College) as the regulatory body for LPNs (more about that later) and;

# The LPN Act

- Identifies the following Objectives (or Objects) or Mandate of the College:
  - To serve and protect the public interest [set practice requirements, registering practitioners].
  - To preserve the integrity of the practical nursing profession [enforcing standards of professional conduct and standards of practice].
  - To maintain public confidence in the ability of the practical nursing profession to regulate itself [publishes professional conduct decisions on the website].
  - To develop processes related to regulation [licensing and registration, practice guidelines, policy].

# Self-Regulation is Important

- Self-regulation involves licensed practical nurses regulating their practice in the best interest of the public.
- By up-holding their Standards of Practice and Code of Ethics as part of the self-regulatory process, LPNs earn public trust.
- Maintaining public trust and confidence is why self-regulation is important.

# Self-Regulation is a Privilege

- A level of professional status comes with achieving the authority to self-regulate because doing so, represents the confidence placed in the practical nursing profession by the government to manage itself and do the right things to ensure the public is protected.

# Self-Regulation is a Privilege

- To keep the privilege, self-regulated professions are accountable to the public and the government to consistently satisfy their objectives of public safety.
- The practical nursing profession could lose the privilege of self-regulation if it was believed the public safety objectives, which are outlined in the [LPN Act](#) are not being met (more on that in a few slides).

# Being Regulated verses Self-Regulation

- The regulatory body **regulates** the practice of LPNs by developing, implementing and enforcing:
  - regulations (e.g., Standards of Practice and Code of Ethics) which represent safe and competent nursing practice, and;
  - processes (e.g., registration, licensing, continuing competence program, and discipline) ensures those entering and remaining in the profession can provide safe and competent nursing services.
- LPNs participate in **self-regulation** by ensuring their practice is consistent with the regulations and taking action when it is not.

# The Role of the Regulatory Body in Self-Regulation

- The Government, through legislation called the *LPN Act*, authorizes the creation of an organization to serve as the regulatory body on for the all the LPNs in the practical nursing profession in Nova Scotia.
- The regulatory body is known as the College of Licensed Practical Nurses of Nova Scotia (CLPNNS or, the College).
- Even though the day to day management of the profession is delegated to the College though legislation, the government (as the issuer of the legislation) retains some control and influence from an “arms-length” away

# The Role of the College

- The College's role or mandate is to protect of the public through the regulation of LPNs and LPN practice.
- The College is responsible to manage the day to day activities of self-regulation by **regulating** the practice of LPNs through the development, implementation and enforcement of:
  - regulations (e.g., Standards of Practice and Code of Ethics) which represent safe and competent nursing practice, and;
  - processes (e.g., registration, licensing, continuing competence program, and discipline) ensures those entering and remaining in the profession can provide safe and competent nursing services.



# How the College Protects the Public

- The College protects the public by promoting the provision of safe, competent, ethical, and compassionate nursing services by LPNs.
- The College meets its mandate of public protection through its four Regulatory Functions:
  - developing registration and licensing processes;
  - setting, monitoring and enforcing standards for practice, and professional conduct and, continuing competence;
  - setting, monitoring and enforcing standards for those entering the profession and PN education, and;
  - approval of practical nurse education programs.

# Regulatory Functions



- Regulatory functions are processes, policies and tools used to ensure every PN program, every new graduate and every practicing LPN has met, and continues to meet the necessary benchmarks to indicate they are prepared to have safe and competent practice.

# Decision Making

- Where the College manages the day to day activities of self-regulation, decisions about the overall direction of practical nursing practice are made by a [Board of Directors](#) (the Board).
- The Board is responsible to make decisions about the strategic direction of the College and the practical nursing profession, as well as ensure College activities meets its mandate as outlined by the *LPN Act*.

# Decision Making

- The Board is responsible to appoint an Executive Director(ED)/Registrar.
- The ED is accountable to manage the day to day operational and regulatory functions as directed by the Board.
- The Board of Directors is made up of:
  - 6 LPNs elected from the general membership;
  - 4 public appointees, and:
  - a member from the College of Registered Nurses of Nova Scotia (CRNNS).
- The Chair of the Board must be an LPN.

# How the Board Meets its Mandate of Public Safety

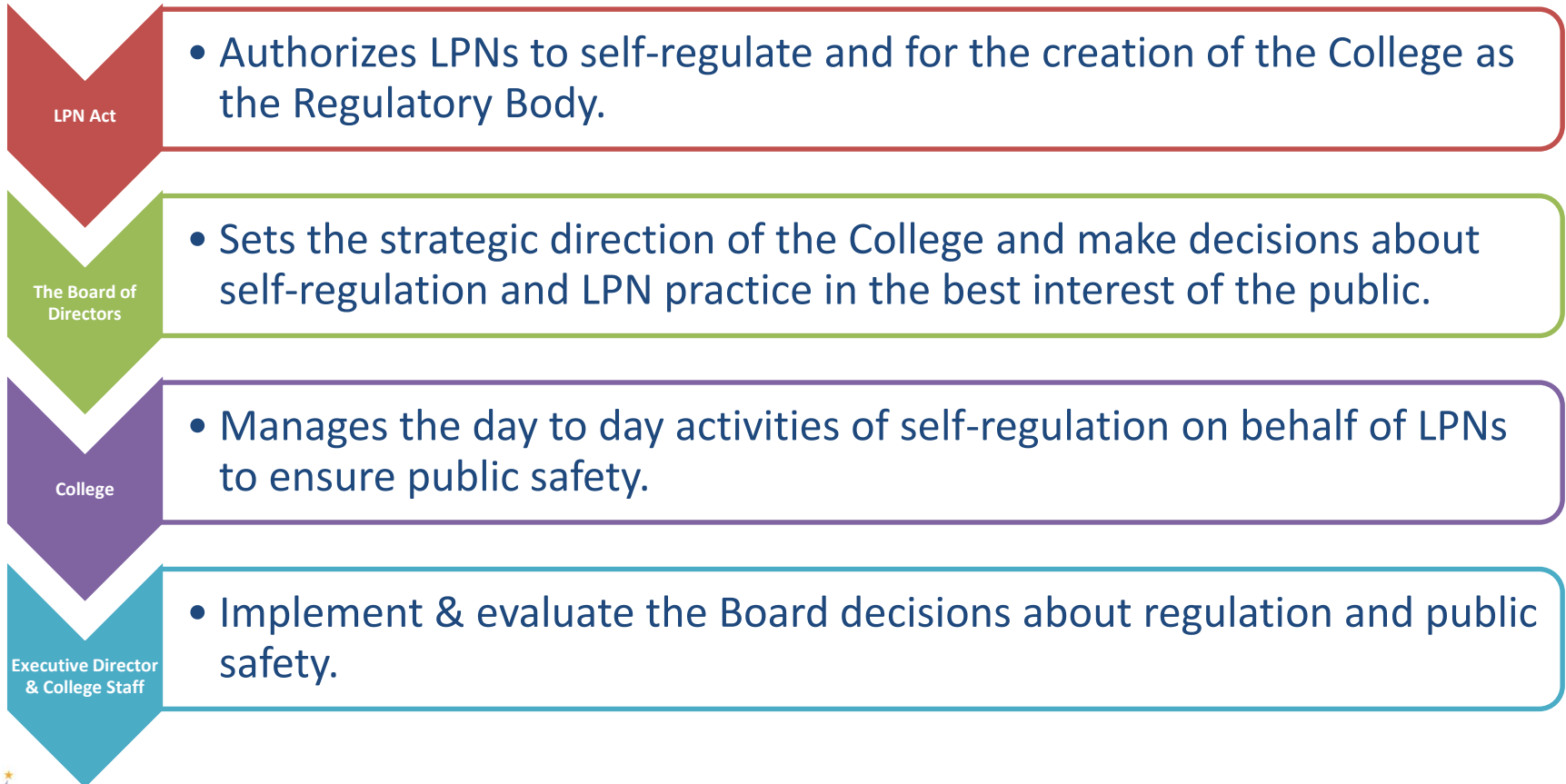
## Strategic Planning & Leadership

- A plan to ensure the College will accomplish its purpose and make effective use of its resources.
- It is a sequential process which includes creating a vision, analyzing internal and external conditions, and identifying the steps for closing the gap between 'where we are and where we want to be' over time.

## Policy Governance

- Operational processes, procedures, tools, supports, and resources to help achieve the vision outlined in the strategic plan.
- The Executive Director, as authorized by the Board, is accountable to use the above as necessary.

# How it all Fits Together



# How Do Individual LPNs Self-Regulate?

- LPNs in Nova Scotia self-regulate through their engagement with, and participation in regulatory activities such as:
  - Self-assessment of their individual competence and capacity and taking action when gaps are identified;
  - Becoming a board member;
  - Serving on a College committee, or;
  - Acting as a subject matter expert and providing perspective or feedback on practice documents, policies or member surveys.
- LPNs also *self-regulate* by practicing within the framework (Standards of Practice and Code of Ethics an) as developed or approved by the College.

# Continuing Competence



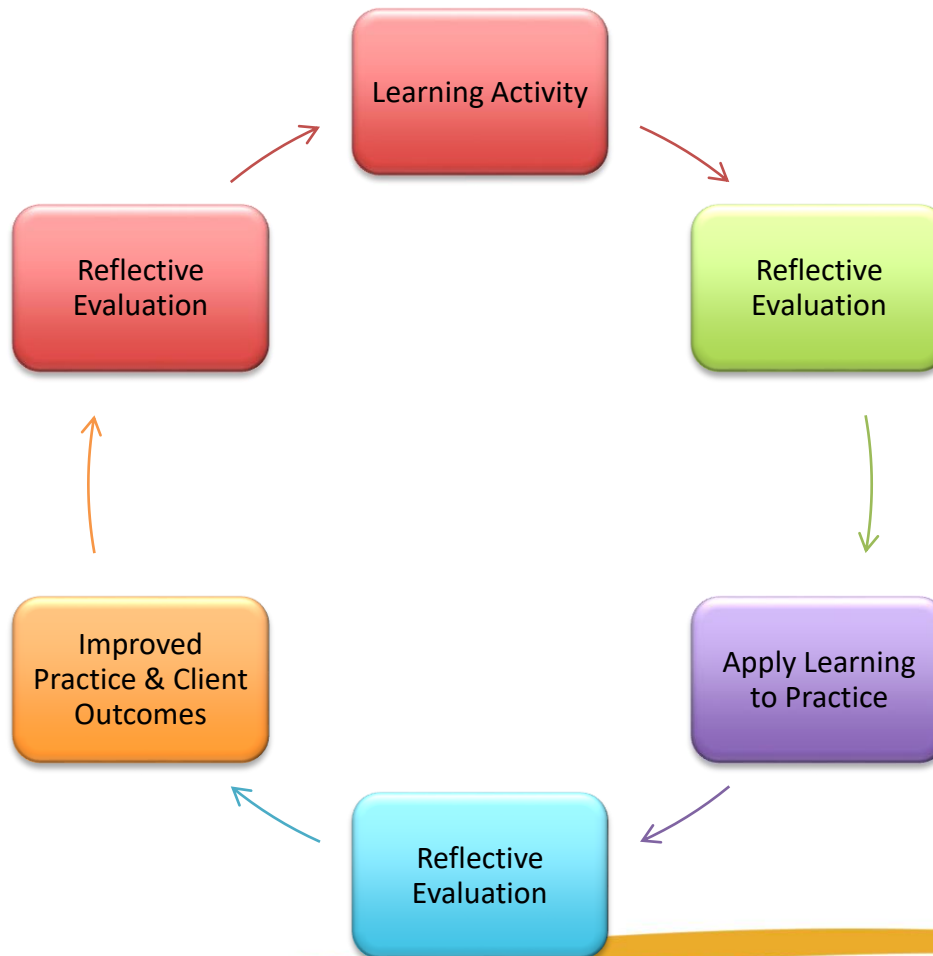
# What is Continuing Competence?

- The *ongoing ability* of a health care provider to integrate and apply the knowledge, skills and judgment, required to practice safely and ethically in their practice context.

# How is Competence Maintained?

- Competence is maintained through an ongoing *reflective practice evaluation* of professional learning activities where new knowledge is integrated into current practice for the expressed purpose of improving nursing practice *and* client outcomes.

# How is Competence Maintained?



# What is a Professional Learning Activity?

- Any learning activity which results in the acquisition of new *nursing* knowledge leading to:
  - A greater understanding of the LPN [Standards of Practice and/or Code of Ethics](#);
  - Enhanced nursing practice, or;
  - Improvement in client outcomes.

# Why the Standards or the Code of Ethics?

- Learning activities should reflect elements of the [Standards of Practice and/or the Code of Ethics](#) because these represent the minimal expectations of safe and competent practice of LPNs in Nova Scotia.
- To maintain nursing competence specific to a practice setting, learning activities should be directly related to nursing *and* the current practice environment.

# What is Reflective Practice?

- Reflective practice (sometimes called *reflective evaluation*), is a continual process where the nurse analyzes and evaluates their own professional experiences as a means for personal learning.
- Reflective practice (RP) helps the nurse to identify what was important about new information learned from an experience so they can apply it in future similar situations.

# What is the Goal of RP?

- Reflective practice or self-reflection can help a nurse gain insight into their overall nursing practice.
- RP helps nurses think about their practice, learn and apply new knowledge so they continue to make safe and competent care decisions.

# Why is RP Necessary?

- RP is necessary because it helps nurses to develop a professional identity and recognize the impact of their own values, beliefs and attitudes on their everyday practice.
- It helps nurses connect new information to existing knowledge.
- It provides nurses with the tools to self-assess and self-regulate their every day practice.
- It is a critical part of learning from one's own experience which is paramount to client safety and competent practitioners.



# Why is RP Important?

- RP is a critical component of continuing competence because competence cannot be maintained if there is no ability to understand and apply new knowledge in the practice setting.
- It allows the nurse to re-shape what they are doing, *while* they are doing it.

# When do I Reflect?

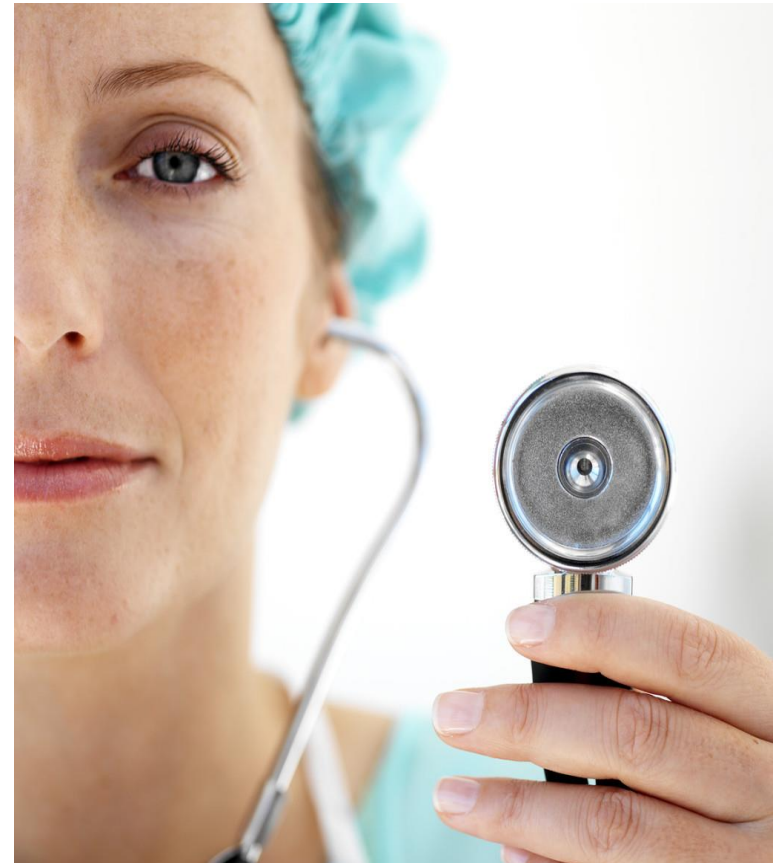
- Most nurses engage in RP when they encounter a new or challenging situation or when they are self-assessing their learning or practice needs.
- However, nurses can engage in reflective practice at any time.



# How do I Reflect?

The process is personal, some include:

- **Journaling**
  - Writing
- **Verbal**
  - Talking with a mentor
- **Thoughtful reasoning**
  - Internal processing



# How do I Reflect on My Nursing Practice?

How to Reflect	Reflective Questions to Start the Reflective Process
Compare your current practice to a list of practice standards to identify any learning needs.	What does a competent practical nurse need to know?
Compare a current practice issue to a past experience as a means to identify a current or future learning need.	What do I need to know to be a competent practical nurse?
Compare a current practice issue to a past experience as a means make a practice decision about the current issue.	What would a competent practical nurse do?
Evaluate your ongoing learning.	What else do I need to learn to remain competent?

# Why is Continuing Competence Important?

- Continuing competence is an essential component of professional nursing practice.
- Public interest is best served when nurses constantly improve their application of knowledge, skill and judgment (competence).
- Continuing competence promotes good nursing practice, assists in preventing poor practice, and contributes to the quality of nursing practice and best possible client outcomes.
- Continuing competence supports practical nurses to make nursing care decisions based on nursing and health care evidence.

# Why is Continuing Competence Important?

- Continuing competence is an important part of being a self-regulated professional.
- Continuing competence requires nurses to:
  - reflect on their practice in relation to the changes occurring in society and the health care environment, and;
  - take action to acquire and develop new knowledge to support safe, competent, ethical and compassionate nursing practice.

# About Continuing Competence Programs

# What is a Continuing Competence Program (CCP)?

- A CCP is a formal process of assessing the continuing competence of a practitioner.
- Essentially it is a quality assurance mechanism. Its goal is to contribute to public protection by ensuring LPNs are engaging in learning with reflective evaluations as a mechanism to support their ongoing competence in their practice.



# Why is a Continuing Competence Program Necessary?

## Public Assurance

- The CCP provides a level of assurance to the public that LPNs remain competent to practice.

## Legislative Requirement

- The CCP is one process utilized by the College to make sure its members have the necessary ongoing competence to provide safe, ethical, competent and compassionate care.

# Continuing Competence Program: Connected to Standards

- Participation in the CCP is an obligation for every LPN, in Nova Scotia.
- The obligation to engage in regular self-assessment, ongoing learning and reflective practice is embedded in the LPN Standards of Practice and Code of Ethics.

# Continuing Competence Programs Are Not New

- Most jurisdictions in developed countries have an expectation that nurses maintain their competence throughout their careers.
- Most self-regulated health professions in Canada have a CCP for their members.
- Some jurisdictions have had programs in place for over 10 years.

# The College of Licensed Practical Nurses of Nova Scotia Continuing Competence Program



# CLPNNS Continuing Competence Program

- Participation in the CCP has been a mandatory condition of licensure since November 1, 2010 and an audit process has been in place since 2012.
- Every LPN holding license to practice (regardless of employment status) in every practice setting is required to participate in the CCP every year.

# CLPNNS Continuing Competence Program

- LPNs who do not participate in, or are or non-compliant with the CCP requirements, only qualify for a 90-day conditional license and must provide proof of participation in order to receive an active practicing license.
- The 4 components\* of the CCP must be completed every year in context of maintaining sufficient practice hours.

\* Only those randomly selected are required to participate in the annual audit

# LPN Practice Hours

- Practice hours are not part of the CCP, however they have significance to both eligibility for licensure and opportunity to maintain competence.
- Practical nursing, although a part of the greater discipline of nursing, has its own scope of practice.
- The annual hourly requirement ensures working practitioners, at minimum, have had opportunities to be exposed to recent and current practice issues and trends.

# LPN Practice Hours

- Each practical nurse must accumulate at least 1000 LPN practice hours each 5 years **OR** 500 hours in the year preceding license renewal.
- Practice hours may apply to the annual requirement as long as accumulated in any role where:
  - LPN licensure is required\*;
  - The functions of the role fall within the LPN scope of practice, and;
  - The individual is required to use all 4 elements of the nursing process (assessment, planning, intervention and evaluation) to function in the role.
- Hours can apply from various clinical, education, management, research or policy development roles.

\* Occasionally, job descriptions can be evaluated for fitness to the LPN Scope of Practice



# LPN Practice Hours

- Hours may not be applied to the annual requirement if they were accumulated in roles:
  - requiring the performance of skill sets shared with nursing, in absence of LPN licensure requirement *or* the use of the nursing process;
  - where a permit or other authorization to practice is required (i.e., RN, MD), or:
  - having its own distinct scope of practice (i.e. Paramedic, psychologist).
- Hours accumulated in volunteer positions may be applied if accumulated in a formal volunteer position requiring LPN licensure.

# CLPNNS Continuing Competence Program Framework



# Self-Assessment of Individual Competence

- Every year, every practical nurse must conduct and document an assessment of their individual competence.
- The self-assessment must use the Standards of Practice as a reference point *and* be relevant to the individuals current practice environment.
- May use CLPNNs tool or employers tool.



# CLPNNS Self-Assessment Tool

- The College has developed a [Self-Assessment Tool](#) to be used as part of the CCP.
- To complete the self-assessment, reflect on each of the assessment questions and rate accordingly.
- Consider creating a learning plan to address any of those areas which were rated lower than others.
- The CLPNNS tool can be used over a five year period so comparisons can be made at each assessment period.

# CLPNNS Self-Assessment Tool

- The Self-Assessment Tool is designed to stimulate personal and thoughtful reflection.
- There is NO requirement to EVER submit a completed self-assessment to the College as part of the CCP audit process. Keep the completed self-assessment in a personal file at home.

# The Importance of a Self-Assessment of Competence

- The self-assessment is an opportunity for the nurse to think about their practice and how it relates to the Standards of Practice, Code of Ethics and/or requirements in the practice setting.
- Often, it is during the self-assessment process the nurse recognizes a knowledge gap and begin to take action to address it.



# Implementation of a Learning Plan or Learning Activities

- Learning Plans must include ***at least*** 2 goals with objectives and timelines.
- Learning Activities must describe impact on client outcomes.



# Implementation of a Learning Plan or Learning Activities

- Competence cannot be maintained without ongoing learning.
- Nurses are expected to engage in professional learning very year.
- Learning can take place in a variety of formal (online learning modules, college course or in-service) or informal (staff meeting, consultation with other health care professional or participation on a workplace or regulatory committee) settings.



# Implementation of a Learning Plan or Learning Activities

- It is important to note some learning activities, though important and valuable, do not meet the requirements of the CCP.
- In order for learning to apply to the CCP learning activities must:
  - Reflect the LPN Standards of Practice or Code of Ethics, or;
  - Apply specifically to nursing practice, or;
  - Requires pre-requisite nursing knowledge (such as the nursing process) to facilitate application of the new information.
- Typically mandated employer education such as WHIMIS, hand hygiene or CPR certification are not applicable to CCP because they do not meet any of the criteria above.

# Implementation of A Learning Plan or A Record of Learning Activities

## Learning Plan

- Is the 'blueprint' for how learning needs will be met over the upcoming year.
- Must include ***at least*** 2 goals with objectives and timelines.
- Must include a reflective evaluation describing impact on client outcomes.

## Record of Learning Activities

- Reflection on practice specific learning completed in the previous year.
- Must identify the new knowledge obtained from the activity.
- Must include a reflective evaluation describing impact on client outcomes.

# The Importance of a Learning Plan or Learning Activities

- The learning plan is the blueprint the nurse uses to set, meet and evaluate their professional development goals.
- Once the plan or activities are identified, the nurse can customize their professional objectives to make sure they achieve their goals.



# Reflective Practice

- **The purpose** of reflective practice is to give the nurse an opportunity to think about the overall impact of their learning and to explain **how** meeting the learning goals has **improved** client outcomes and **enhanced** their everyday practice.
- This is the most critical part of the learning plan or activity.



# Reflective Practice Framework

Use this framework to accurately describe how client outcomes have been positively impacted by your learning.

**I have increased my competence in:**  
*(Describe your learning goal)*

Performance of venipuncture

**by completing the following activities.**  
*(Learning activities as part of your learning goal).*

1. Attended an in-service (lab staff).
2. Completed an online learning module.
3. Worked with a mentor when I performed the skill on clients.

**As a result,** *(identify how your practice has improved).*

I have gained confidence in this skill and no longer have to ask a colleague to draw blood for me.

**This means** *(outline how your clients are positively impacted by your learning)*

Specimens are collected quicker and results come back sooner. This decreases the risk of a delay in the clients treatment.

# The Importance of Reflective Practice / Evaluation

- A reflective evaluation is a critical element of continuing competence because this is where impact of learning is connected to improvements in practice or client outcomes.



# CCP Audit

- The purpose of the [CCP audit](#) is to ensure LPNs are participating in CCP as required as they have declared on their annual renewal form.

Click [HERE](#) to view a copy of the renewal form. Scroll to page 2, Section 10 to read the Declaration Statement.

- The College is required to conduct an audit as part of meeting its [mandate](#) of public safety.



# CCP Audit

- LPNs declaring compliance with the CCP on their annual registration renewal form qualify for a Active Practicing License and are eligible for selection in the audit.
- Those failing to declare compliance with the CCP are issued a one-time a 90-day conditional license and must provide proof of participation in order to receive an active practicing license.
- Once compliance has been declared, the nurse is eligible for selection in the audit.



# CCP Audit

- Those not employed as LPNs *but hold an* LPN license are under obligation to participate in the CCP process, which includes the audit.
- The rationale for this is because LPNs holding an active license are eligible to return to work at any time and as such, must maintain competence if this is a possibility.

# Audit Selection Process

- Selection is random, via a list created from the registration data base.
- Typically the list is approximately 4-6% of the general membership.
- Although selection is random, the College has the authority to direct a member to participate in the audit.
- The audit selection criteria is set to make every effort to avoid selecting those who have recently graduated from a PN program or those who were previously audited in the last 5 years.

# Exclusion Criteria

- Not every nurse is eligible for the audit every year.
- Those meeting the *Test for Exclusion* may be exempt from the process for one year:
  - Nurses entering the profession for the first time within the last 6 month of the selection date;
  - Nurses completing a PN re-entry program within the last 6 month of the selection date;
  - Nurses who have practiced less than 48 hours in the previous licensing year due to family or medical reason, or;
  - Nurses with extenuating circumstances.
- Generally, nurses who are exempt from the audit for one year are required to participate in the audit in the next year.

# The Audit Process

- Selected members are sent a *Audit Packet* in the by mail.
- The Audit Packet contains:
  - Explanatory letter and instructions regarding what documents to submit for review;
  - [FAQ documents](#);
  - CCP Questionnaire, and;
  - [Record of Professional Activities form](#).

# The Audit Process

- Selected members have attested on their most recent renewal form to completing the CCP requirements for the previous year, therefore 30 days to submit their learning documents to the College should be ample time.
- Those who do not submit their learning documents by the deadline are re-issued a one-time 90-day conditional license and are required to provide the College additional proof of compliance with the CCP or their license will be moved to inactive on day 91.

# The Audit Process

- Once received, learning documents are sent to the Continuing Competence Program Committee (the 'Committee') for review.
- The Committee is made up of 3-5 LPNs in active practice in Nova Scotia.
- Generally the Committee meets each February or March to conduct the audit.

# The Audit Process

- The role of the Committee is to review each learning document to determine if there is enough information to suggest compliance with the CCP.
- Participation is evidenced by:
  - Appropriate learning goals or activities;
  - Implementation within the proscribed time frame, and;
  - Evidence the nurse is able to discuss the impact the learning has had on client outcomes and their individual practice.
- The committee uses a scoring rubric to ensure consistent review of learning documents.

# The Audit Process

- The rubric defines the minimal acceptable elements of a learning plan or activities.
- A score is achieved based on the quality of the elements in the plan.
- The more elements in an plan that match the elements defined in the scoring rubric, the higher the score and the greater the likelihood verifying compliance with the CCP.



# Possible Outcomes of the Audit

- There are 3 possible outcomes of the audit process:
  - Compliance with the CCP is verified ;
  - Compliance with the CCP is partially verified, and;
  - Compliance cannot be verified.



# Possible Outcomes of the Audit



Compliance  
with CCP is  
verified

On average, 85% of those audited since 2012 were deemed compliant with CCP without further action.

- There is sufficient evidence (appropriate learning goals, concrete objectives, within the appropriate timeframe and reflective evaluation) in the learning documents to suggest compliance with CCP.
- No further action is required by the nurse and they are notified of this by email.

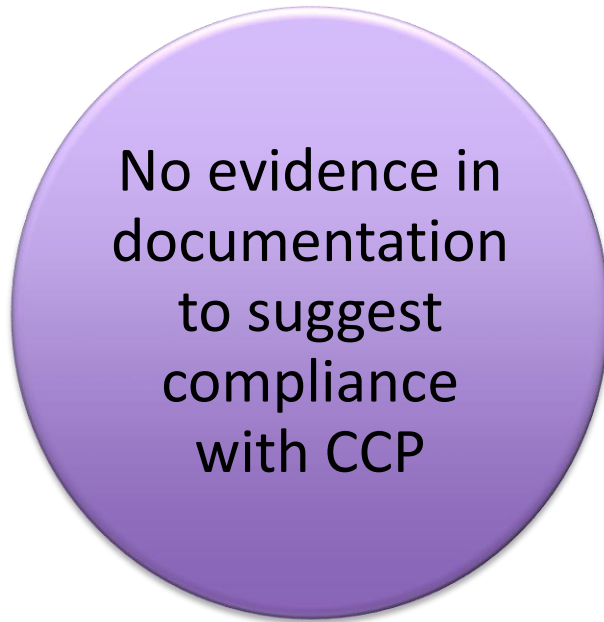
# Possible Outcomes of the Audit

Compliance  
with CCP is  
partially  
verified

- The learning documents lack enough detail to completely verify compliance with CCP. The nurse is notified and provided 30 days to submit additional information or provide clarity to the original submission.

The most common reason for partial verification is a lack of detail in the reflective evaluation. On average about 9% of those audited since 2012 were required to submit additional documentation to the committee. All of these eventually achieved compliance with CCP.

# Possible Outcomes of the Audit



- There is no evidence in the learning documents to suggest compliance with CCP.
- The nurse is re-issued a 90-day conditional license and is required to submit new documents and complete additional learning to gain compliance with CCP.

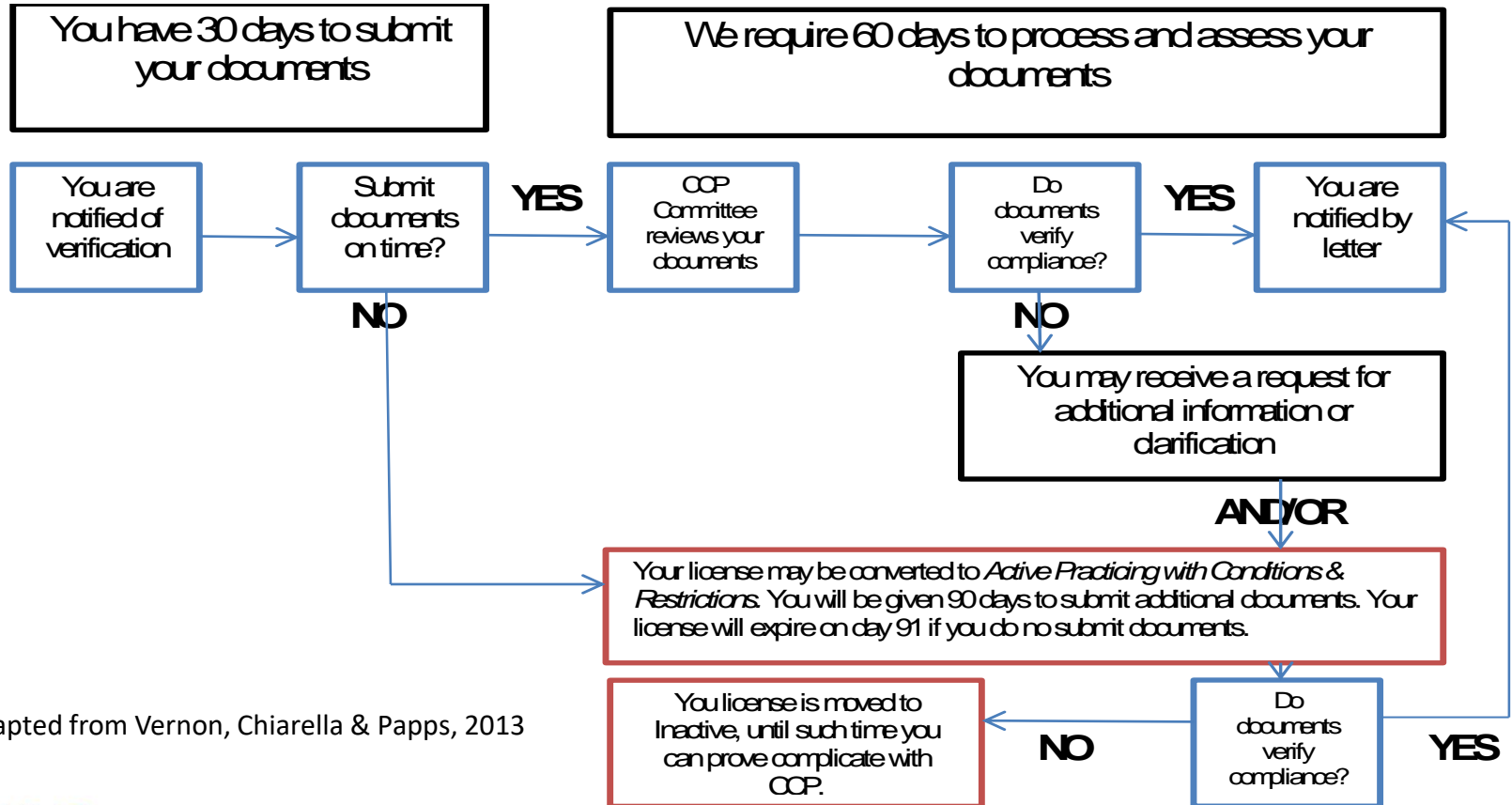
Most common reasons for this included a lack of information in the learning plan or the learning plan was never fully enacted and could not be reflectively evaluated. Since 2012 only 6% of those audited were moved directly to a conditional license. All of these nurses eventually achieved compliance with College assistance and submission of additional documents.

# The Importance of the Audit

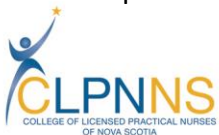
- The audit: confirms the validity of the data collected as part of the CCP; ensures LPNs are participating as they have declared, and; satisfies the Colleges' mandate of public protection.
- The audit grants some legitimacy to the overall CCP.



# Audit Timeline



Adapted from Vernon, Chiarella & Papps, 2013



# Participation in the CCP is Mandatory



- Every year, every practical nurse, in every practice setting is obligated to participate in CCP.
- Participation is a mandatory component of licensure.



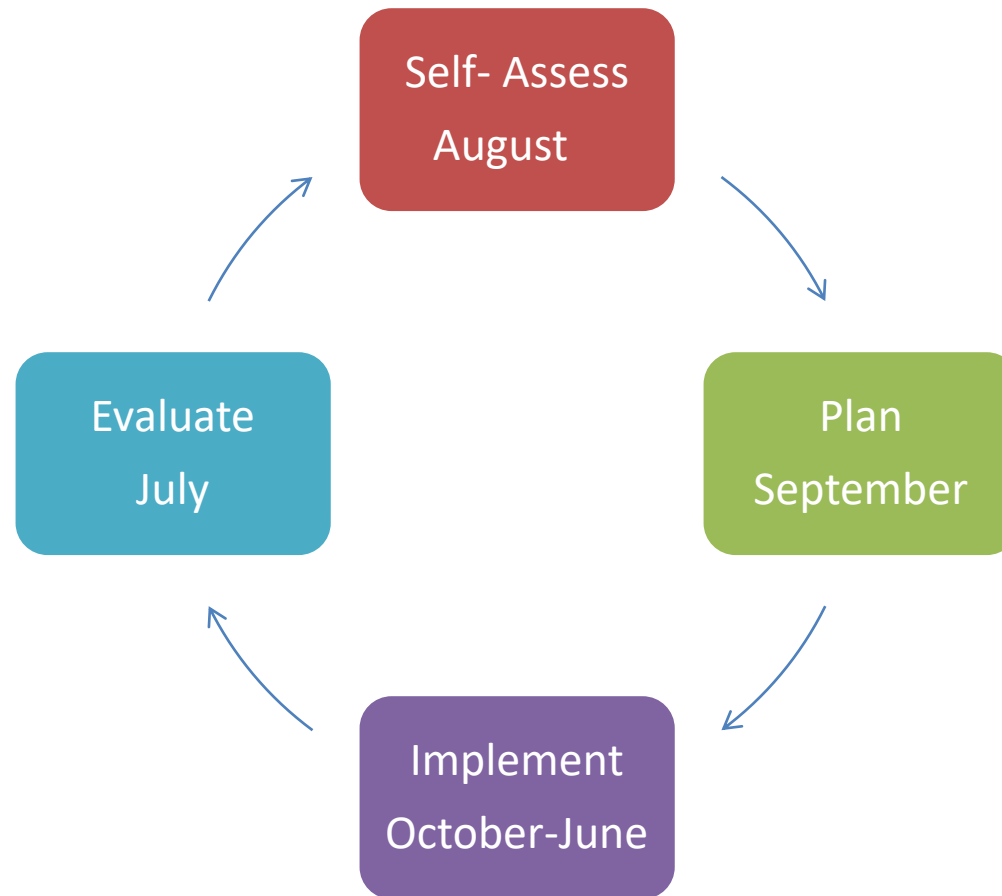
# Choosing Not to Participate in the Continuing Competence Program

- Eligible LPNs choosing not to participate in the CCP will eventually have their nursing license moved to inactive and will be ineligible for re-licensure with out further action.





# A CCP Timeline\*

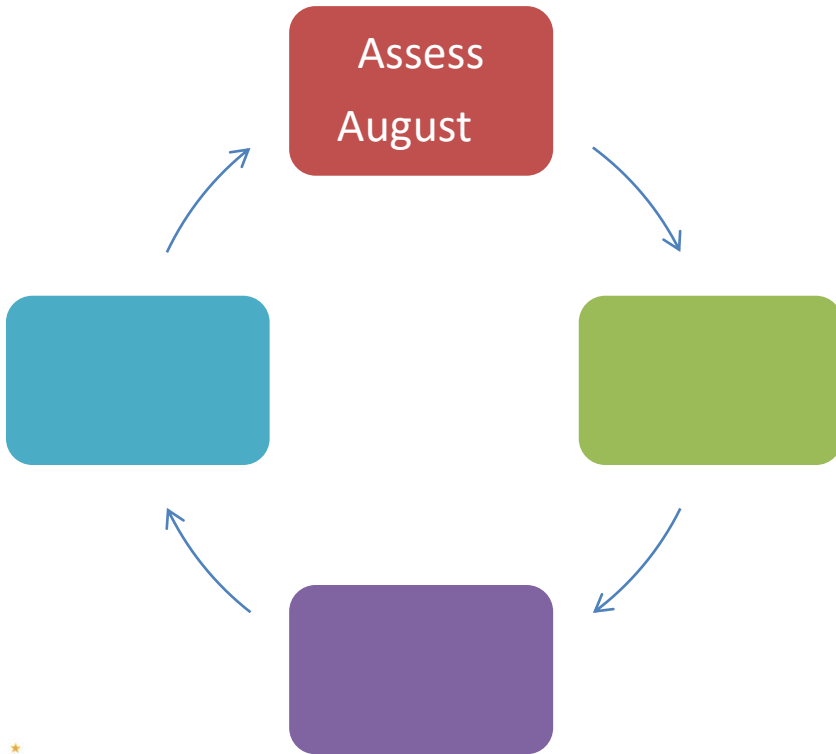


\* Suggested

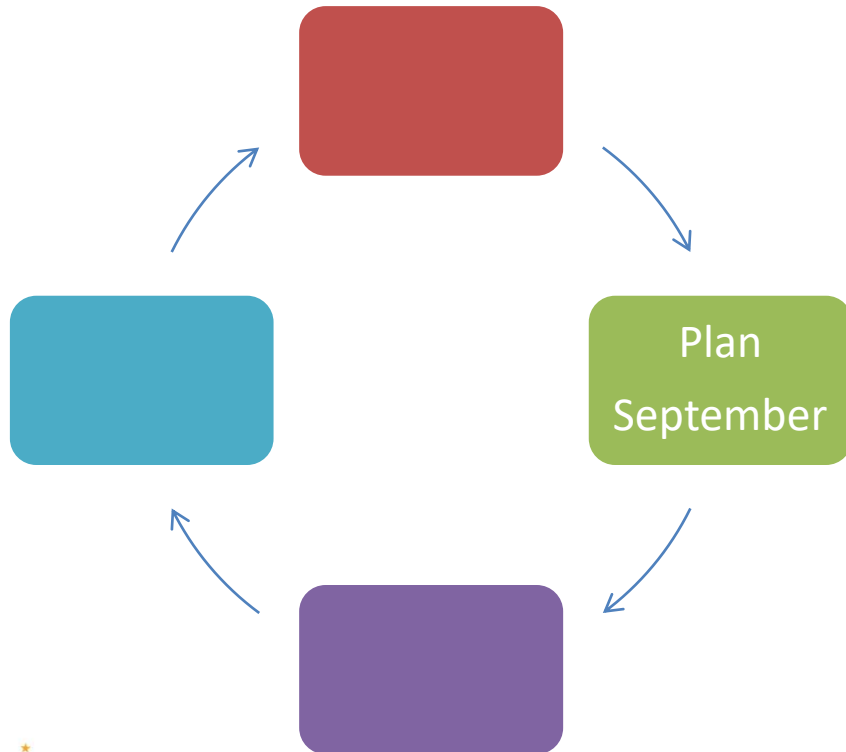
# A CCP Timeline

## AUGUST

- Complete a self-assessment of your individual competence using the CLPNNS tool or a tool provided by your employer.
- Review the Standards of Practice and Code of Ethics.
- Compare current assessment to previous assessments noting any changes or improvements.



# A CCP Timeline

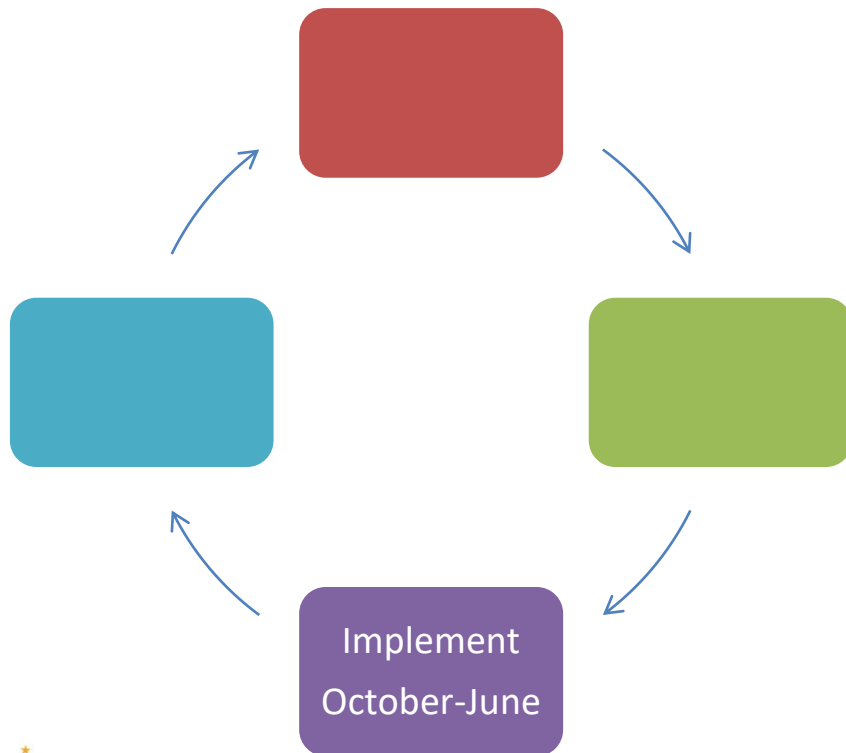


## September

- Identify at least 2 learning goals for the upcoming year based on your self-assessment.
- Determine what action to take to meet your goals and set timelines, for completion.

# A CCP Timeline

## October – June

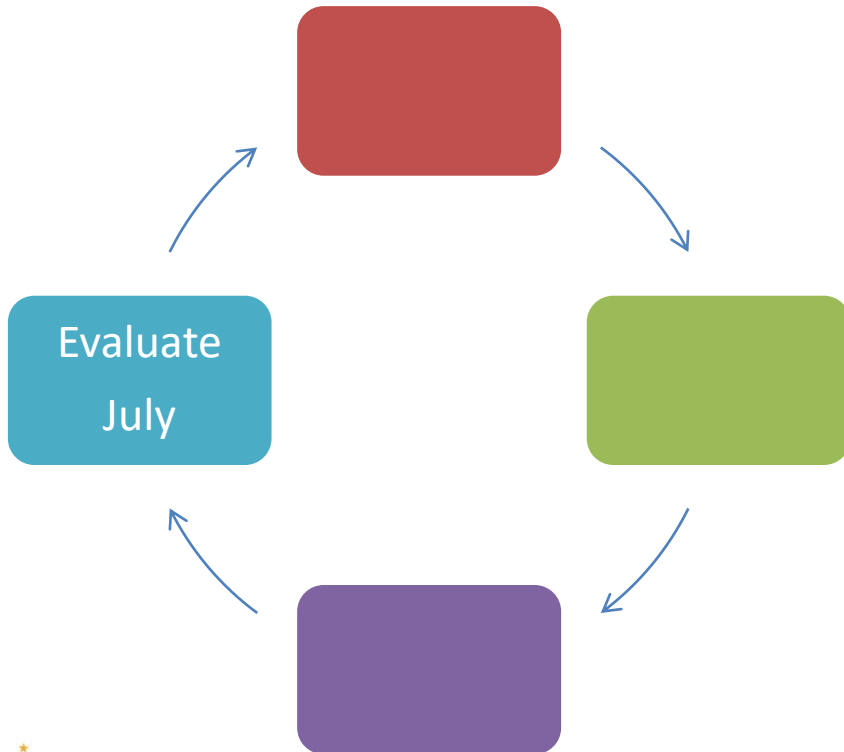


- Put your plan in to action.
- Keep a portfolio of your professional learning activities, dates times and reflections.
- Add or delete interventions as necessary.

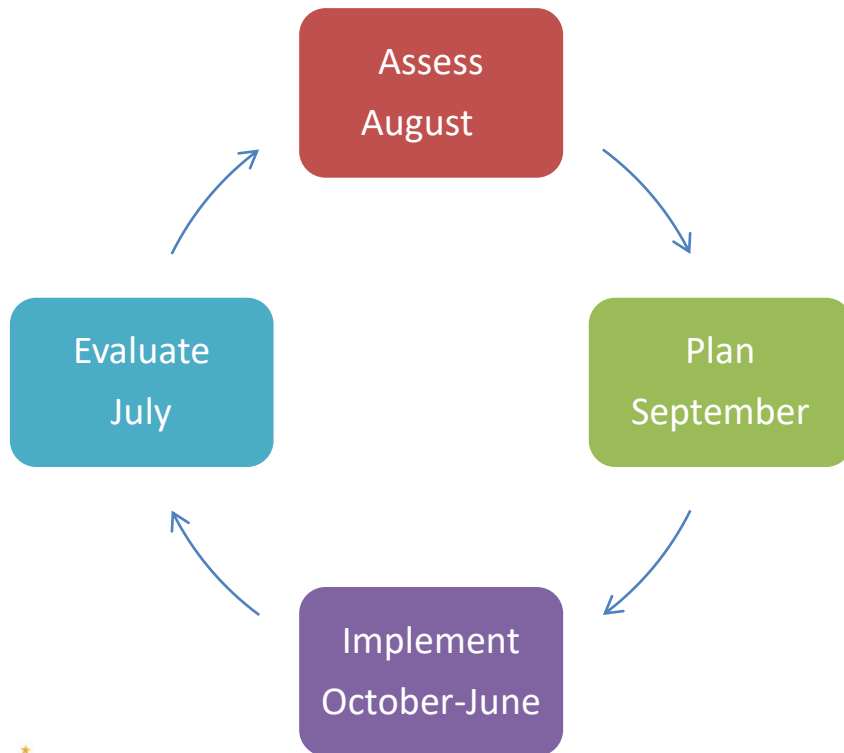
# A CCP Timeline

## July

- Reflectively evaluate your plan by identifying how the learning activities has positively impacted client outcomes and enhanced your practice.



# And Repeat



- As one plan gets evaluated, think about the next plan.
- Learning plans are ongoing every year.
- Some components of a learning plan *may* be carried over from the previous year *as long as* there is sufficient reflective evaluation on the components that have been completed.

# Points to Ponder About the Audit Process

- CCP is not a punitive process, however it is time sensitive.
- College staff are available to make sure every nurse is successful in the process as long as they are willing to complete the necessary competence activities.



# Point to Ponder About the Audit Process

- Compliance with the CCP **cannot** be achieved by submitting lists of learning activities without a reflective evaluation **because** the reflective evaluation is where learning is linked to improved outcomes or practice and competence.





# Point to Ponder About the Audit Process

- The audit process is always looking back at the learning plans that have ***been completed*** from the previous year. (Think of it as similar to filing taxes.)
- Learning activities that fall outside the audit year dates, **can not** be included in the consideration of compliance.



# Questions?

## Call

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