



Inspiring the Next Phase Forward:

A Legislative Consultation Report for Creating One Nursing Regulator in Nova Scotia

Winter 2018



As with any successful project, there is a core group of dedicated individuals leading the way forward. In the co-creation of one nursing regulator, we call this group the Formation Team.

Led by Ann Mann and Sue Smith, the Formation Team is responsible for accomplishing the operational work necessary to create one nursing regulator in Nova Scotia. No strangers to the world of regulation, the Formation Team is composed of staff from the College of Licensed Practical Nurses of Nova Scotia (CLPNNS) and the College of Registered Nurses of Nova Scotia (CRNNS) who are appointed to the team based on their knowledge and experience in nursing self-regulation, project management and policy governance.

The Formation Team also works in tandem with the Transition Governance Committee who is accountable to develop and implement a new governance framework for one nursing regulator. This committee includes members from both the CLPNNS and CRNNS Boards who, along with the Formation Team, are laying the groundwork necessary to build a strong and bright future for nursing self-regulation in Nova Scotia.

This report was produced by the Formation Team on behalf of the Transition Governance Committee, CLPNNS and its Board of Directors, CRNNS and its Council and the public of Nova Scotia whom we serve.



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Inspiring the Next Phase Forward

As the journey to co-create one nursing regulator in Nova Scotia continues, this work has inspired us to find innovative ways to engage in new conversations with others. By tapping into new sparks of energy, fresh ideas are ignited and the pathway to a new future becomes bright.

A milestone moment in this journey has been in creating and consulting stakeholders on the new Act for one nursing regulator in Nova Scotia. Stakeholders from across Canada were invited to participate and provide feedback on the changes being proposed to the new Act, helping to build the foundation for one nursing regulation and a brighter future for Nova Scotians.

Finding new ways to engage with others also inspired us to look beyond the traditional means of engagement and develop new strategies to inform, listen and collect feedback from stakeholders. Hosting a public town hall, streaming the event online and using Facebook advertisements to reach the public in the community were all innovative ways we remained accessible and inclusive during our consultation with stakeholders.

We invite you to read our newest consultation report which summarizes the most recent feedback gathered during our consultation with stakeholders in the fall of 2017 and winter of 2018.

Sincerely,

A handwritten signature in black ink, appearing to read 'Ann Mann'.

Ann Mann, RN, BN, MN
Executive Director and Registrar
College of Licensed Practical Nurses
of Nova Scotia

A handwritten signature in black ink, appearing to read 'Sue Smith'.

Sue Smith, RN, BN, MAOL
Chief Executive Officer and Registrar
College of Registered Nurses
of Nova Scotia

This report is to accompany the *Building a New Future Together: A Legislative Consultation Report for One Nursing Regulator in Nova Scotia* (Fall 2017).



Our Approach to Consultation

A consistent thread throughout our consultation with stakeholders including members of the public has been the notion that our interactions with others must be open, informed and coordinated, along with an overall approach to creating one nursing regulator that is built on the philosophy of accountability, transparency and consistency. This is how our consultation was first implemented and since then, has helped to inform every decision and frame every perspective. More information on our approach can be found in our first consultation report titled *Building a New Future Together: A Legislative Consultation Report for One Nursing Regulator in Nova Scotia* (2017).

At the same time, we recognize that our approach must also remain flexible in order to meet the needs of stakeholders and to continue providing new, fresh ways to offer opportunities for input. During our most recent consultation this past fall and winter, we placed additional emphasis on an approach that was accessible and inclusive and reached more Nova Scotians offering new feedback opportunities as a result.

An Accessible Approach to Consultation

In order to provide meaningful opportunities for feedback, our approach to consultation included offering simple and accessible ways for stakeholders to understand the proposed changes to the new Act before providing feedback. This approach inspired the design of our consultation process, including the use of a community-based public town hall event and online survey and enabled stakeholders to learn about the content and context of the material before sharing their perspective with us.

An Inclusive Approach to Consultation

In keeping with our accountability to the public, our approach to consultation also embraced the opportunity to reach individuals from across Nova Scotia and beyond using today's modern technology. Through the use of live streaming and social media, this approach enabled diverse stakeholders, with a broad range of voices and perspectives, to participate in the consultation process and represent the interests of the Nova Scotian public we serve.



Consultation Process

Our most recent consultation began in the fall of 2017 and continued into early 2018 with the following objectives in mind:

1. Inform and educate stakeholders about the proposed changes to the new Act for one nursing regulator
2. Collect feedback from stakeholders on the proposed changes to the new Act, specifically in the five key areas where substantive changes are being proposed: (i) governance; (ii) mandate and accountability; (iii) professional conduct; (iv) registration and licensure; and (v) scope of practice.

Town Hall: Inform and Educate

In keeping with our accessible approach to consultation, we accomplished our first objective through our community-based public town hall event held on December 6, 2017.

At the town hall, guests were presented with the proposed changes to the new Act and were encouraged to ask questions and provide feedback. Guests could attend in-person or through our live stream option, which made it possible for an individual in any location to actively participate in the town hall and ask questions either in-person or through a virtual chatroom. The event was also recorded and is available on both the CLPNNS and CRNNS websites for stakeholders.

79% of stakeholders indicated feeling informed about the changes being proposed to the new Act

Individuals were informed of the town hall through a variety of awareness efforts, including the use of social media for paid and free of charge posts, membership newsletters, website updates and targeted emails. Industry stakeholders, community groups and specialty interest groups were also contacted to share this opportunity with their membership.

Online Survey: Collect Feedback

A significant aspect of the consultation process was to collect feedback from stakeholders on the proposed changes to the new Act. This was achieved through an open online survey launched on December 15, 2017 that was available to all stakeholders and facilitated by a third-party survey provider.

While the main purpose of the survey was to collect feedback, it too was designed to inform and educate stakeholders along the way. Respondents were asked to review the proposed changes to the new Act and respond to the following three questions:

- How satisfied are you that the proposed changes:
 1. Ensure the public interest is the new nursing regulator’s top priority?
 2. Enable the new nursing regulator to remain current, relevant and nimble?
 3. Demonstrate the new nursing regulator’s goal of being accountable?

Individuals were informed of the online survey through membership newsletters, website updates and targeted email invitations.



Invited Stakeholders

Since our consultation process was open and inclusive, any individual from the Nova Scotian public was able to participate. In addition to the public’s open invitation, we reached out to 85,300 individuals from the following stakeholder groups who were invited to be a part of our consultation process.

Public of Nova Scotia

As regulators, CLPNNS and CRNNS make decisions that are in the best interest of the Nova Scotian public. The public must have a means to share their opinions with those making regulatory decisions and a formal consultation process is one of the ways to ensure the views of Nova Scotians are being heard.

Industry Partners

Given the complexity of the health care sector, we work alongside a diverse group of industry partners who fulfill different roles within the sector including those in labour, regulation, education, employment and advocacy (Appendix B). While many of these partners are not regulators, they are knowledgeable about the opportunities and challenges within the nursing profession.

Nursing Members

As self-regulated professionals, nurses are best positioned to understand the opportunities and issues facing the nursing profession. Their input and engagement in regulatory processes such as this consultation process assist licensed practical nurses (LPNs), registered nurses (RNs) and nurse practitioners (NPs) to maintain the public’s trust in the profession and in their ability to regulate themselves in the public’s interest (Appendix A).

CLPNNS and CRNNS Staff

The staff at CLPNNS and CRNNS are accountable to carry out the operational functions mandated by legislation (Appendix A). To fulfill this responsibility, staff are required to conduct environmental scans, consult with stakeholders and keep their finger on the pulse of nursing regulation provincially, nationally and internationally. As a result, they are well-informed to evaluate the current and future state of self-regulation in Nova Scotia. The CLPNNS Board and CRNNS Council were also involved in the consultation process.

Who Did We Reach?

*71,621 Nova Scotians
128 Industry Partners
13,555 Nurses*



Overall Findings

Over the course of consultation, over 1,600 individuals from diverse stakeholder groups participated in the opportunities available to them.

The findings reveal that overall, the majority of stakeholders are pleased with the new Act and consistently indicated being satisfied with the proposed changes being proposed.

In fact, when stakeholders were asked to indicate how satisfied they were with the list of changes being proposed in the new Act, none of the changes received a satisfaction rating of less than 7.5/10. This means that the majority of stakeholders support the direction and development of the new Act and demonstrates confidence from stakeholders on the move to one nursing regulator in Nova Scotia.

Stakeholders also validated the principles of accountability, transparency and consistency that were initially introduced to stakeholders during our early consultations. Overall, 89% of stakeholders indicated being satisfied that these principles are appropriate in guiding the new nursing regulator which again confirms the direction and progression of this work.

The following pages provide an overview of the consultation findings, organized according to the five key areas of the Act where substantive changes are being proposed: (i) governance; (ii) mandate and accountability; (iii) professional conduct; (iv) registration and licensure; and (v) scope of practice.

While this report provides an overview of our findings, all consultation data was analyzed and key insights were considered and incorporated into the new Act as part of the legislative package submitted to the provincial government on February 12, 2018.



Stakeholder Feedback: Governance

As part of our consultation, we asked stakeholders to share their feedback on the following governance changes proposed for the new Act:

- Identify the governing body as a Board
- Commit to public representation of at least 33 and up to 50%, in order to include the public in decision-making for the first Board
- Commit to equal nursing representation from each “legacy college” (CLPNNS Board and CRNNS Council), with three nursing representatives from each legacy college and five public representatives from the combined legacy college for the first Board

Stakeholders Said...

The majority of stakeholders support the changes being proposed to the governance section of the new Act. Overall, stakeholders indicated that the changes ensure public interest is a priority. Much of the feedback from stakeholders focused on the merits of a Board with varied levels of public representation and the ways in which public representatives could be supported to fulfill their governance role within a profession that may be new to them.

If you want to be patient-centred, you need to make the public a 50% stakeholder. This will create a true partnership and accountability – Nursing Member

77% of stakeholders are satisfied that these proposed changes will ensure public interest is a top priority for the new nursing regulator

77% of stakeholders are satisfied that these governance changes will demonstrate that the new Board is committed to being accountable to registrants and the public



Consultation Findings: Mandate and Accountability

During the consultation process, stakeholders were asked to share their feedback on the following mandate and accountability changes proposed for the new Act:

- Reference a single nursing profession that includes all three nursing designations in Nova Scotia (LPNs, RNs and NPs)
- Replace the term “member” with “registrant” throughout the Act in order to communicate the public interest mandate of the new nursing regulator
- Identify that the new nursing regulator will be the accountable for regulating the nursing profession
- The new nursing regulator will have the ability to regulate other new nursing designations and other health care providers if requested by the government
- Ensure that the mandate specifies that regulators are to advance and promote the provision of nursing services to serve public interest
- Include provisions that ensure the new nursing regulator will be accountable and transparent to the government, the public and registrants, and that a Minister will be identified to oversee the new legislation.

Stakeholders Said...

Overall, stakeholders express support for the changes being proposed to the mandate and accountability section of the new Act. In particular, stakeholders agreed that the changes demonstrate the one nursing regulator’s accountability to the public and the new opportunities and commitment to engage with the public. A few stakeholders however, expressed some hesitancy with the transition from “member” to “registrant” and also shared an interest in learning more about how one nursing regulator will demonstrate its accountability to the public.

I like the use of the wording “registrant” versus member. I think it sends a clear message to the public as well as nurses regarding the purpose and intent of the licensing body –
Nursing Member

79% of stakeholders are satisfied that these proposed changes will ensure public interest is a top priority for the new nursing regulator

80% of stakeholders are satisfied that these proposed changes will enable the new nursing regulator to remain current, relevant and nimble

81% of stakeholders are satisfied that these proposed changes will demonstrate the new nursing regulator’s goal of being accountable to registrants and the public.



Consultation Findings: Professional Conduct

During the consultation process, stakeholders were asked to share their feedback on the following professional conduct changes proposed for the new Act:

- Add clear language that requires registrants to cooperate with the new nursing regulator during all processes, including complaint investigations
- Update the confidentiality and disclosure provisions to apply to all regulatory information so as to have a balance between the protection of registrants’ privacy and the regulator’s accountability to the public
- Add the ability for the new nursing regulator to use court proceedings to recover cost awards by having the authority to enforce cost orders
- Add the ability for a professional conduct committee to impose a fine in cases of registrants’ misconduct, when seen as appropriate
- Add the ability for the Complaints Committee to refer matters to the Fitness to Practice Committee to ensure the appropriate professional conduct processes are used in all cases.

Stakeholders Said...

The majority of stakeholders support the changes being proposed to the professional conduct section of the new Act, including that these changes will enable the new nursing regulator to be accountable, current, relevant and nimble. Despite overall satisfaction from stakeholders, a minority of stakeholders did express anxiety about the ability for a professional conduct committee to impose a fine in cases of registrant misconduct. In the future, this anxiety can be reduced by sharing additional information and education about the parameters of this change.

I fully support applying confidentiality and disclosure provisions to all regulatory information as long as it is weighed in favor of greater transparency in the public interest and not solely to protect the privacy of the registrant – Industry Partner

78% of stakeholders are satisfied that these proposed changes will ensure public interest is top priority for the new nursing regulator

77% of stakeholders are satisfied that these proposed changes will enable the new nursing regulator to remain current, relevant and nimble

78% of stakeholders are satisfied that these proposed changes will demonstrate the new nursing regulator’s goal of being accountable to registrants and the public

80% of stakeholders are satisfied that these proposed changes will demonstrate the new nursing regulator’s commitment to accountability



Consultation Findings: Registration and Licensure

During the consultation process, stakeholders were asked to share their feedback on the following registration and licensure changes proposed for the new Act:

- Remove the transitional license (RN Act) and the graduate-practicing license (LPN Act) from the new Act;
- Introduce a “conditional” registration for applicants to work in a specific capacity while they are waiting for full registration and licensure
- Allow for new registers and categories of license in the future for increased flexibility
- Allow for the creation of a Registration and Licensure Committee, who will have the ability to issue restrictions on licenses at the point of licensure if appropriate
- Allow licensed nurses from other jurisdictions to work in Nova Scotia on a limited (temporary) basis without having to obtain a license
- Expand the practice review process for all nursing designations over time.

Stakeholders Said...

Overall, stakeholders support the proposed changes to the registration and licensure system for the new Act, which focused on maintaining public interest while removing barriers to licensure and increasing flexibility. The most prominent feedback from stakeholders was the variance in support in allowing licensed nurses from other jurisdictions to work in Nova Scotia on a limited basis without having to obtain a licence. While most stakeholders saw the merits of this change, some thought all nurses should be registered in Nova Scotia in order to practise nursing.

I like the clarification with conditional licensure. I also like the flexibility of temporary licenses for qualified registered nurses from outside Nova Scotia to practice here in emergency situations or even as travel nurses –Nursing Member

77% of stakeholders are satisfied that these proposed changes will ensure public interest is top priority for the new nursing regulator

79% of stakeholders are satisfied that these proposed changes will enable the new nursing regulator to remain current, relevant and nimble

75% of stakeholders are satisfied that these proposed changes will help remove the existing barriers to nursing practice in Nova Scotia



Consultation Findings: Scope of Practice

During the consultation process, stakeholders were asked to share their feedback on the following scope of practice changes proposed for the new Act:

- Introduce a single definition of nursing practice that will apply to all three nursing designations to allow for the scope of practice to evolve
- Maintain the distinct and separate scopes of practice and entry-to-practice requirements for nursing designations
- Add “expanded scope of practice” to provide the new nursing regulator with the ability to modify the scope of practice for the nursing designations, with the approval of the Board
- Remove the requirement for NPs to be part of a “collaborative practice relationship”, which has limited access to NPs
- Clarify the language requiring NPs to report changes in practice settings and client populations.

Stakeholders Said...

As part of the new Act, the existing nursing and the distinct and separate scopes of practice and entry-to-practice requirements will not change. This decision was supported by 94% of stakeholders who believe it is important to maintain a distinction between scopes of practice and individual accountabilities of all three nursing designations.

The majority of stakeholders also support the scope of practice changes being proposed to the new Act. In particular, stakeholders liked that the changes reflect the autonomous role of the nurse practitioner as well as enables the new nursing regulator to remain current, relevant and nimble in the evolving health care environment.

Nursing practice is changing all the time and the new regulations have to keep up with this changes in order for the public to receive the best care –Nursing Member

78% of stakeholders are satisfied that these proposed changes will ensure public interest is top priority for the new nursing regulator

83% of stakeholders are satisfied that these proposed changes will enable the new nursing regulator to remain current, relevant and nimble

75% of stakeholders are satisfied that these proposed changes will help remove the existing barriers to nursing practice in Nova Scotia



Thank You

Thank you to all stakeholders who participated in the consultation process in 2017 and 2018. Your feedback has helped to inform the direction and creation of one nursing regulator in Nova Scotia and we look forward to continuing this journey together. Looking ahead to the future, both the 2017 and 2018 consultation reports will be included in the legislative package being submitted to the provincial government and stakeholders can continue to expect new ways to stay involved in this work and to help create one nursing regulator in Nova Scotia.

Appendix A

Introduction to Nursing Members and Staff Participants

Staff from CLPNNS and CRNNS with experience and knowledge of nursing self-regulation in Nova Scotia were invited to participate in our legislative consultation process.

Karen Archibald
Professional Practice Consultant, CLPNNS

Lynn Miller
Policy Consultant, CRNNS

Jennifer Best
Practice Consultant, CRNNS

Darlene Mott
Professional Conduct Consultant, CRNNS

Clare Brown
Practice Consultant, CRNNS

Elizabeth Parenteau
Acting Manager for Professional Conduct
Services, CRNNS

Doug Bungay
Director of Professional Practice and
Policy, CLPNNS
Acting Director Practice, Policy and
Legislative Services, CRNNS

Paula Prendergast
Acting Manager for Registration Services,
CRNNS

Kristina Koller
Professional Conduct Consultant, CRNNS

Cathy Rose
Policy Consultant, CRNNS

Matthew LaFond
Professional Conduct Consultant, CRNNS

Karen Sigouin
Director of Registration and Professional
Conduct Services, CLPNNS

Ethel Landry
Registration Consultant, CLPNNS

Jylene Simmons
Professional Practice Consultant, CLPNNS

Trent Maclsaac
Practice Consultant, CRNNS

Haley Young
Registration Consultant, CRNNS

Over 13,550 CLPNNS and CRNNS members were invited to participate in our consultation process



Appendix B

Introduction to Industry Partners

Stakeholders from the following 128 organizations were invited to participate in our consultation process.

Along the Shore & Truro and Area Community Health Boards
Annapolis & Kingston/Greenwood Community Health Boards
Antigonish, Guysborough & Strait Richmond Community Health Boards
Atlantic Mentorship Network
Assessment Strategies Inc.
Association of New Brunswick Licensed Practical Nurses
Association of Nova Scotia Peri-Anesthesia Nurses
Association of Registered Nurses of Newfoundland and Labrador
Association of Registered Nurses of Prince Edward Island
Bayshore HealthCare
Burnside Law Group
Canadian Association of Critical Care Nurses
Canadian Association of Nephrology Nurses and Technologists
Canadian Association of Neuroscience Nurses
Canadian Association of Nurses in Oncology
Canadian Association of Schools of Nursing
Canadian Council of Cardiovascular Nurses
Canadian Council for Practical Nurse Regulators
Canadian Council of Registered Nurse Regulators
Canadian Federation of Nurses Unions
Canadian Nurses Association
Canadian Nurses Protective Society
Canadian Orthopaedic Nurses Association
Canadian Society of Ophthalmic Registered Nurses
Canadian Union of Public Employees
Cape Breton University Nursing Society
Cape Breton University School of Nursing
Central and East Pictou and Pictou West Community Health Boards
Central Inverness, North Inverness & Victoria County Community Health Boards
Changing Tides Consulting Inc.
Clare, Digby and Area, Shelburne County and Yarmouth Community Health Boards
Cobequid & West Hants Community Health Boards
College and Association of Registered Nurses of Alberta
College of Dental Hygienists of Nova Scotia
College of Licensed Practical Nurses of Alberta
College of Licensed Practical Nurses of British Columbia
College of Licensed Practical Nurses of Manitoba
College of Licensed Practical Nurses of Newfoundland and Labrador
College of Nurses of Ontario
College of Occupational Therapists of Nova Scotia



College of Paramedics of Nova Scotia
College of Physicians and Surgeons of Nova Scotia
College of Registered Nurses of British Columbia
College of Registered Nurses of Manitoba
Community Health Nurses of Canada
Dalhousie University Faculty of Health
Dalhousie University Nursing Society
Dalhousie University School of Nursing
Dartmouth & Southeastern Community Health Boards
Denturist Licensing Board of Nova Scotia
Doctors Nova Scotia
Eastern Kings Community Health Board
Eastern Shore-Musquodoboit Community Health Board
Engage Nova Scotia
Family Practice Nurses Association of Nova Scotia
Government of Yukon’s Professional Licensing and Regulatory Affairs
Halifax and Chebucto West Community Health Boards
Halifax Chamber of Commerce
Health Association of Nova Scotia
Immigrant Services Association of Nova Scotia
Infection Prevention and Control Canada
Information and Privacy Commissioner of Nova Scotia
IWK Health Centre
Lloyd Sadd Insurance Brokers
Lunenburg County and Queens Community Health Boards
Mental Health and Addictions Nurses of Nova Scotia
Mental Health Foundation of Nova Scotia
Midwifery Regulatory Council of Nova Scotia
National Council of State Boards of Nursing
National Nursing Assessment Service
Northside the Lakes, East Cape Breton & Central Cape Breton County Community Health Boards
Northwood
North Shore, East Hants, & South Colchester Community Health Boards
Nova Scotia Association of Medical Radiation Technologists
Nova Scotia Barristers’ Society
Nova Scotia Board of Examiners in Psychology
Nova Scotia College of Chiropractors
Nova Scotia College of Counselling Therapists
Nova Scotia College of Dispensing Opticians
Nova Scotia College of Medical Laboratory Technologists
Nova Scotia College of Optometrists
Nova Scotia College of Pharmacists
Nova Scotia College of Physiotherapists
Nova Scotia College of Respiratory Therapists
Nova Scotia College of Social Workers
Nova Scotia Community College’s School of Health and Human Services
Nova Scotia Dental Technicians Association
Nova Scotia Department of Health and Wellness
Nova Scotia Department of Labour and Advanced Education



Nova Scotia Dietetic Association	Pink Larkin
Nova Scotia Emergency Nurses Association	Prince Edward Island Licensed Practical Nurse Registration Board
Nova Scotia Gerontological Nurses Association	Protection for Persons in Care Program
Nova Scotia Government and General Employees Union	Provincial Dental Board of Nova Scotia
Nova Scotia Health Authority	Provincial Nursing Network
Nova Scotia Health Research Foundation	Public Health Association of Nova Scotia
Nova Scotia Nurses Union	Pugwash and Area, SOAR, & SPAR Community Health Boards
Nova Scotia Nursing Informatics Group	Registered Nurses Association of the Northwest Territories and Nunavut
Nova Scotia Prescription Monitoring Program	Registered Nurses Professional Development Centre
Nova Scotia Regulated Health Professions Network	Saskatchewan Association of Licensed Practical Nurses
Nurse Next Door	Saskatchewan Registered Nurses' Association
Nurse Practitioner Association of Nova Scotia	Shannex
Nurses Association of New Brunswick	St. Francis Xavier University School of Nursing
Nursing History of Nova Scotia Group	Unifor
Occupational Health Nurses Association of Nova Scotia	Urology Nurses of Canada
Operating Room Nurses Association of Nova Scotia	Université Sainte Anne Soins Infirmiers Auxiliaires
Ordre des infirmières et infirmiers auxiliaires du Québec	VON Canada
Ordre des Infirmières et Infirmiers du Québec	We Care Home Health Services
Pharmacy Association of Nova Scotia	Western Kings and Central Kings Community Health Board
	Yukon Registered Nurses Association

