

ACCOUNTABILITY: REGULATORY FRAMEWORK

CNA POSITION

Model of Accountability for CNA Regulatory Work

The purpose of this position statement is to outline those areas where the Canadian Nurses Association (CNA) collaborates with provincial and territorial jurisdictions and maintains transparency to ensure open and candid exchange.

The model's focus area puts forth the idea that uniformity of regulatory practices should not be achieved at the expense of quality. This section also states that CNA's regulatory work includes assisting jurisdictional members to promote and maintain professional self-regulation.

The model's goals indicate that CNA's activities serve the national purpose of promoting and facilitating the orderly development of inter-jurisdictional and national regulatory approaches that are coordinated, consistent, proactive and value added and that enhance accountability. Such approaches contribute to and support CNA jurisdictional members' mandate to protect the public. The goals listed in this document describe ways of reducing barriers to the national mobility of nurses and of communicating to the international community.

CNA believes that accountability for its regulatory work comprises two guiding principles: collaboration and transparency. CNA's accountability model first describes the focus and goals of the framework followed by the two principles.

Focus

The focus of CNA's regulatory work includes:

- fulfilling CNA's corporate objective "to promote uniform and high quality regulatory practices in the public interest and in collaboration with nursing regulatory bodies";¹
- implementing CNA's position statement *Nursing Professional Regulatory Framework* (2001);
- assisting CNA jurisdictional members in their efforts to promote and maintain professional self-regulation; and
- influencing the federal and international arenas where there are matters that affect regulatory work.

Goals

CNA strives to promote and facilitate the orderly development of inter-jurisdictional, and harmonization of national, regulatory approaches that are coordinated, consistent, proactive, accountable, value added and contribute to and support CNA jurisdictional members' mandate to protect the public.

¹ (CNA, 2004, p.8).



To this end, CNA aims to develop, in collaboration with jurisdictional members, policies, frameworks, standards, mechanisms and products that:

- advance public safety and protection through the delivery of safe, ethical and competent care (e.g., the Canadian Registered Nurse Examination [CRNE]);
- contribute to the knowledge, skills and abilities of registered nurses to meet the health care needs of Canadians;
- enhance interprofessional practices that increase accessibility and improve quality of health care for Canadians;
- advance quality work environments that support safe, competent and ethical nursing care;
- assist internationally educated nurses to successfully integrate into the Canadian health system; and
- facilitate the national mobility of nurses by reducing barriers.

CNA also coordinates the national regulatory framework and facilitates the development of inter-jurisdictional regulatory policies, standards and practices, such as the Mutual Recognition Agreement (MRA), and communicates these on the international scene.

CNA helps ensure the congruency of regulatory policy matters by:

- promoting and engaging in regulatory research;
- increasing awareness of international factors that affect self-regulation;
- organizing national and international forums on regulatory issues as the need is identified by jurisdictions or CNA; and
- liaising with national and international regulatory organizations.

Collaboration

The successful development of national regulatory work and standardized, efficient, safe, inter-jurisdictional practices requires collaboration² amongst numerous parties. CNA will build on and recognize the existing work of its jurisdictional members and continue to work with other relevant provincial/territorial, national and international bodies, governments, unions, the public and employers.

Transparency

Transparency requires both an open process and goal clarity. An open process involves the public and provides clear reasons and rationales for decisions. To be transparent, the goals of regulatory accountability must be connected to the overarching objective of public protection.

² Collaboration is defined as a continuum including communication, consultation, coordination, cooperation and formal collaboration (Winer & Ray, 1997).

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BACKGROUND

CNA comprises 11 provincial and territorial members, of which 10 have a legislative mandate to protect the public.

The *Canadian Constitution Act, 1867*, distributed legislative jurisdiction between the provinces and federal government. The vast majority of professions are regulated by the provincial or territorial governments because the courts have interpreted the Constitution of Canada so as to put professions under their law-making power. It is for this reason that legislation governing the nursing profession is found in provincial/territorial statutes. The legislatures have, over the years, delegated the responsibility to our profession to self-regulate. This privilege of self-regulation afforded to the regulatory bodies is based on an overarching duty of protecting the public.

Areas of exclusive federal power that affect nursing include:

- interprovincial and international trade and commerce;
- marine hospitals;
- hospital insurance and medicare;
- criminal law (e.g., if a nurse commits a criminal act against a patient);
- weights and measures (e.g., the use of metric affects nurses from the United States practising in Canada);
- defence (e.g., Armed Forces, coast guard);
- First Nations, Métis and Inuit matters (e.g., nurses working on reserves);
- marriage and divorce (e.g., consent to treatment);
- airports (e.g., quarantine due to SARS); and
- census and statistics (e.g., Canadian Institute for Health Information collecting statistics).

In some areas, there is shared authority between Parliament and provincial legislatures. For example, immigration (where there is a conflict, national law prevails) and old age and disability.

Provincial/territorial regulatory bodies carry out their mandate through varied and numerous functions. These include developing initial and continuing licensure/registration requirements; setting and maintaining standards of education and nursing practice; monitoring and enforcing safe, ethical and competent nursing care; and, when necessary, taking disciplinary action.

The provincial/territorial nursing regulatory bodies recognize that there are occasions when their work can be complemented and supported by national regulatory frameworks that can further promote self-regulation, be value added and be cost efficient.

Two of the primary areas of CNA's business, through its wholly owned subsidiary, Assessment Strategies Inc. (ASI), are assessment and national competency development. The focus of CNA's current work has been on entry into practice for general licensure for registered nurses and nurse practitioners as well as certification for nursing specialties. CNA's core business involves:

- assessment of registered nurses and nurse practitioners through examination (e.g., CRNE, Canadian Nurse Practitioner Examination);

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- assessment of specialty nursing areas (e.g., CNA Certification Program);
- continuing competence and current practice experience of registered nurses (e.g., CNA Certification Program);
- assessment of competencies that are difficult to measure such as developing alternative exam question formats, (e.g., short-answer questions) and methodologies (e.g., key features);
- assessment of internationally educated nurses (e.g., exploring the creation of a national assessment centre);
- development of national ethical competencies (e.g., developing the *Code of Ethics for Registered Nurses* [2002]);
- development of national entry-level competencies for assessment purposes; and
- development of national specialty competencies.

Approved by the CNA Board of Directors, March, 2005

References:

Canadian Nurses Association. (2004). 1996 Supplementary letters patent in *Letters patent bylaws rules and regulations*. Ottawa: Author.

Winer, M., & Ray, K. (1997). *Collaboration handbook: Creating, sustaining and enjoying the journey*. St. Paul, MN: Amherst H. Wilder Foundation.

Also see:

Related CNA Position Statements:

Code of Ethics for Registered Nurses (2004)

Nursing Professional Regulatory Framework (2001)

Related CNA Publications:

Code of Ethics for Registered Nurses (2002)

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