

Saskatchewan Association of
Licensed Practical Nurses



Saskatchewan Association of Licensed Practical Nurses
Strategic Plan 2017 - 2021

Growth through change

HISTORY OF SALPN

The Licensed Practical Nurse profession originates from the World War II era. Nursing Assistants were trained to meet the needs of the health care system following a war induced shortage of Registered Nurses. The nursing assistants were accepted as making valuable contributions to the health care system, and although they have evolved considerably, they continue to do so today.

Nursing Assistants (NA) were first incorporated into the Saskatchewan Registered Nurses Association (SRNA) Act in 1955. In 1957, the Saskatchewan Nursing Assistants Association (SNAA) was established, however the organization continued to be governed and regulated by the SRNA. The purpose of the SNAA council was to share information related to practice with the membership.

In 1972, a national licensure exam was introduced and enforced as a requirement for entrance to the profession.

Over a period of several years, beginning in 1974, the SNAA explored the possibility and options related to seeking legislative autonomy. Member resolutions and information shared with government was integral in the proclamation of the “Certified Nursing Assistants Act” in June of 1985. The organization became known as Saskatchewan Association of Certified Nursing Assistants (SACNA).

In 1992 the act was retitled “Licensed Practical Nurses Act” and the organization name became “Saskatchewan Association of Licensed Practical Nurses” or commonly known as SALPN. The CNA title evolved to Licensed Practical Nurse (LPN). Legislation stipulated the LPN worked under the direction of a Physician, Registered Nurse, or Registered Psychiatric Nurse.

The year 2000 was an important year in the history of the SALPN. A major amendment to the act reflected the changes to the LPN profession and the evolvement of the LPN role. LPNs were granted autonomy in practice with the removal of the “works under the direction of...” clause, and SALPN was granted the authority to complete approval of practical nursing education programs. The LPN profession officially became an independently self regulated profession.

The first decade of the 21st century was dedicated to the development of processes related to governance, administration and regulation, practice guidance documents, licensure requirements, mandatory educational upgrades, and changes to the Practical Nursing program all of which created the foundation to the organization and the profession as it is today. In 2005/06, the first competency profile was released as the result of an initiative of the Western Canadian Provinces. The Competency Profile outlined the competencies within the LPN practice and served as a reference to both LPNs, employers of LPNs, and the education program in the understanding of the evolving role of the LPN in Saskatchewan.

SALPN had been a member of the Canadian Practical Nurses Association (eventually titled PN Canada), an organization intended to advocate for and promote Practical Nursing in Canada. In 2005, SALPN announced its resignation from PN Canada as the advocacy efforts were inappropriate for the participation of a regulatory body responsible for protection of the public through regulation of the LPN profession. Instead, the SALPN became a member to a newly founded collective regulator group, Canadian Council of Practical Nurse Regulators (CCPNR).

In 2006, changes were made to the entry to practice credential, from a certificate (58 weeks) to a diploma (65 weeks). The 2006 program changes resulted in the basic program as it exists today.

Over the past decade, the SALPN membership has expanded to a current number of 3700 members. LPN practice and the utilization of LPNs has evolved based on major changes within the profession in the 2006 program revision. SALPN members completed two major mandatory educational upgrades related to Medication Administration and Health Assessment. SALPN has continued to develop administratively. Once a one-person staff has now grown to nine permanent positions.

The first formal strategic plan was developed in 2007. This document outlines the future strategic plan for the organization: 2017 – 2021.

THE PRIVILEGE OF SELF-REGULATION

The Saskatchewan Association of Licensed Practical Nurses (SALPN) is responsible to ensure the safety of the public with the regulation of the LPN profession in Saskatchewan. The authority to regulate the profession is granted with the Licensed Practical Nurses Act 2000. The Act delegates the privilege of professional regulation to the SALPN Council. The council consists of seven elected LPN members, three government appointed public representatives and the Executive Director, who is hired by council.

It is the duty of SALPN at all times:

- a) to serve and protect the public, and
- b) to exercise its powers and discharge responsibilities in the public interest and not in the interest of the membership.

The objectives of SALPN are:

- a) to regulate the practice of the profession and govern the members in accordance with the Act and the bylaws; and
- b) to assure the public of the knowledge, skill, proficiency, and competency of the members in the practice of practical nursing.

SALPN registers and issues licenses to LPNs from within the province or outside the province/country who meet the entry to practice requirements as set out for the profession. Anyone practicing as an LPN in Saskatchewan must hold a current Practicing License or Graduate Practical Nurse license to practice.

ANTICIPATING FUTURE CHANGE

Regulatory processes are known to be and often accepted as slow, but in a rapidly changing world regulators are constantly faced with the challenge of ensuring public safety consistently and effectively. SALPN will need to be responsive to the changing environment to meet public protection obligations. Practitioners are adjusting the methods in which they deliver care, or “practice”, and therefore SALPN needs to be ahead of the process to identify potential competence deficits and public risk.

The health care system is under immense pressure to deliver improved timely health care in a cost-efficient manner. This has never been truer in an economically challenged Saskatchewan and Canada. With this challenge comes a risk that traditional methods in which practitioners are utilized may change. Due to the current landscape, practitioners may find themselves exposed to new or different risks, over-utilized, or adapting to entirely new ways of delivering health care. The regulator must analyze their role as protector of the public amidst these changes. How will the integration of technology through inventions like care delivering robots change the way we regulate? Social media and hand held devices also have a large impact on the context of member conduct. How will the next generation of tech savvy practitioners be prepared to appropriately manage the technological and communicative power of the devices?

In times past, regulatory authorities have been accepted and supported to carry out their work as regulators and advocates of the profession. This has been especially true in Saskatchewan. In an era of transparency, increased public accountability, transformational change and regulatory complexity, SALPN believes a dual mandate is no longer ideal. As a regulatory body, we need to ensure we have the right processes in place to identify and mitigate public risk and to take swift and appropriate actions when necessary. With these things in mind, SALPN has outlined a plan for the future.

Our future direction

MISSION

Protect the public through regulation of the Licensed Practical Nurse profession in Saskatchewan.

VISION

Excellence in the regulation of Licensed Practical Nurses.

VALUES

SALPN's actions are guided by the following values.

- **Integrity** - accountability for our actions and decisions guided by honesty, fairness and transparency.
- **Quality** - promoting excellence through the creation and application of policy in LPN regulation.
- **Professionalism** - nursing regulation supportive of nurses continuously building competence, knowledge, skills and expertise to offer the highest quality care.
- **Respect** - creating a culture of equity, inclusiveness and diversity within the SALPN, the membership and external stakeholders.

ASPIRED OUTCOMES

By 2021:

- The SALPN regulatory mandate is clear
- The SALPN is a leader in regulation.
- The SALPN has developed and maintains strong governance structure.
- Licensed Practical Nurses understand Scope of Practice, accountabilities, and regulatory obligations
- The SALPN is an optimized organization
- The SALPN remains financially viable
- The SALPN staff are at their optimum; happiest and healthiest.

STRATEGIC THEMES & STRATEGIC OBJECTIVE STATEMENTS

1. Public Protection and Regulatory Leadership:

The SALPN will improve public protection with a distinct focus on regulatory practices. The SALPN will continuously improve board governance and risk management.

2. Responsible Stewardship and Risk Management:

The SALPN will manage finances responsibly while investing in the protection of the public and organizational development.

3. LPN Scope, Accountability, and Regulatory Obligations:

The SALPN will proactively address unsafe LPN practice with clear, timely, and responsive regulatory resources.

4. Excellence Through Optimization:

The SALPN will develop shared common principles, processes, and tools uniting our staff and Council to a common goal.

5. Knowledge & Health:

The SALPN will enrich and support the professional and personal development of our team.

STRATEGIC INITIATIVES

1. Public Protection and Regulatory Leadership

- a) Assess all functions of the SALPN for regulatory appropriateness. Delegate, remove, or maintain Functions.
- b) Implement organizational strategy to increase regulatory knowledge and effectiveness.
- c) Establish board governance development.
- d) Establish partnerships with other health regulators.
- e) Establish relationships with non-health regulators.

2. Responsible Stewardship and Risk Management

- a) Implement risk management strategy.
- b) Implement capital projects plan.

3. LPN Scope, Accountability, and Regulatory Obligations

- a) Disperse Competency Profile complete with education to registrants, employers, educators, stakeholders.
- b) Establish online record keeping with the CEP program.
- c) Define LPN context of practice.
- d) Create awareness and process related to fitness to practice.
- e) Establish jurisprudence learning.
- f) Establish up-to-date library of practice resources.
- g) Establish advanced foot care specialized area of practice.
- h) Regulate private practice.

4. Excellence Through Optimization

- a) Develop and implement 4-year communication strategy.
- b) Digitization of the SALPN office.
- c) Acquire and design future space
- d) Assess and refine all administration processes.

5. Knowledge and Health

- a) Implement Professional and Personal Development Program
- b) Enhance Self-Directed Work Practices
- c) Enhance Employee / Family Assistance Program