



Regulatory Performance Standards

December 2020

This document was approved by the Council of the Saskatchewan Association of Licensed Practical Nurses on December 4th, 2020.

The Council would like to credit and thank the health regulatory authorities in Ontario for sharing their work in the development of a Performance Measurement Framework in their province, which has made this work possible for SALPN.

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Purpose

These regulatory performance standards have been developed to support:

1. Improving the SALPN's regulatory performance
2. Increasing SALPN's accountability and transparency
3. Preserving the SALPN's regulatory focus into the future
4. Serving as a guide for strategy development, operational planning and reporting mechanisms.

Definitions

The following table outlines the meanings of specific terms used within this standards document.

Domain	The area of focus to which SALPN's efforts are applied.
Standard	The desired outcome the SALPN strives to achieve and against which actual performance is measured.
Indicator	Further details or specifications of the standard to guide the SALPN is achieving the standard.
Evidence	The decisions, activities, processes or the quantifiable results to demonstrate progress towards or the achievement of the standard.

Domain: Governance

Standard 1: Council and Statutory Committee members have the knowledge, skill and ability needed to effectively execute their role and fulfil their responsibilities as they relate to SALPN's public protection mandate

Indicator	Evidence
<p>Where possible, Council and Statutory Committee members demonstrate they have the knowledge, skill and ability before becoming a member of the Council or a Statutory Committee.</p>	<ul style="list-style-type: none"> • Council and Statutory Committee members have been screened against competency/suitability criteria and attend or complete an orientation or training about the role of the SALPN and the responsibilities and expectations of their role to be eligible for election or appointment. • After election or appointment and before their first meeting, Council or Committee public appointees receive orientation or training about the SALPN's role, including the responsibilities and expectations of the role.
<p>Council regularly assesses their alignment with the regulatory mandate and the effectiveness of their governance practices while addressing identified opportunities for growth through ongoing education and training.</p>	<ul style="list-style-type: none"> • Demonstrate the use of a competency inventory to identify the competency needs of the Council and inform the recruitment and nomination process based on the results. • Demonstrate the Council effectively exercises oversight of the SALPN and the evaluation of the Executive Director's performance. • Demonstrate that the Council has methods to identify and address regulatory risks. • Demonstrate that the Council evaluates the effectiveness of the Council and its activities. • Demonstrate how and what informs the developmental and training opportunities provided to Council (both individual and collective training). • Demonstrate that Council has an established and effective Council professional development program.

<p>Council regularly assesses the responsibilities and effectiveness of Statutory Committees against the legislated requirements and the principles of procedural fairness and natural justice.</p>	<ul style="list-style-type: none"> • Demonstrate the Council has developed an effective education and training program for Statutory Committee members. • Demonstrate the processes and decisions of Committees are assessed against the principles of procedural fairness/natural justice and right-touch regulation¹. • Decisions of the Committees are issued in a timely manner with coherent and intelligible reasons. • Demonstrate adequate resources and supports are provided to Statutory Committees. • Demonstrate that independent decision-making is ensured. • Demonstrate how the Council measures the effectiveness of Statutory Committees.
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Standard 2: Council decisions consider both the safety and the interest of the public

Indicator	Evidence
<p>All decisions related to the SALPN's legislated responsibilities and strategic priorities are impartial, evidence-informed, and consider both the safety and interest of the public.</p>	<ul style="list-style-type: none"> • The Council Code of Conduct and Conflict of Interest Policy is publicly accessible. • The Council demonstrates its commitment to effective regulatory and board governance practices and responds to behaviour contrary to those practices. • The Council demonstrates that it has a conflict of interest registry that Council members must complete annually: • The form includes definitions of conflict of interest and questions based on specific areas of risk for conflict. • At each Council meeting, members declare any updates to their reported conflicts and any conflict specific to the meeting agenda.

¹ <https://www.professionalstandards.org.uk/what-we-do/improving-regulation/right-touch-regulation>

	<ul style="list-style-type: none"> • Council meeting minutes enable the public to identify the reasons and public interest rationale for decisions.
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Standard 3: The SALPN acts to enhance public trust through transparency about decisions made and actions taken

Indicator	Evidence
Council and Discipline Committee decisions are transparent, timely and accessible.	<ul style="list-style-type: none"> • Approved Council minutes, including an action item summary, are easily available on the SALPN website. • Council decisions made between meetings are recorded in the Council minutes. • Decisions of the Discipline Committee are easily available on the SALPN website. • The SALPN's strategic documents are easily available on the SALPN website.
Communication and information provided by the SALPN is accessible and timely.	<ul style="list-style-type: none"> • Notice of meetings and hearings and other relevant materials are published on the SALPN website in advance. • Appropriate parties are notified of consultation processes, and participation is accessible and manageable.

Domain: Resources

Standard 4: The SALPN manages resources responsibly

Indicator	Evidence
<p>The SALPN demonstrates responsible stewardship of its financial and human resources in fulfilling its legislated responsibilities and regulatory mandate.</p>	<ul style="list-style-type: none"> • Demonstrate that fulfilment of the legislated responsibilities and implementation of the strategic plan is adequately resourced. • Maintain an acceptable reserve to address unexpected expenditures (e.g. litigation, discipline hearings, appeals to the Court) is in place. • Provide a breakdown of how licensure fees are allocated to SALPN's operations In SALPN's annual report • Demonstrate the Council's oversight role in ensuring an effective organizational development strategy and succession planning is in place.

Domain: System Partner

Standard 5: The SALPN actively engages with other health regulators and system partners to align oversight of the practice of the profession and support execution of SALPN's mandate

Indicator	Evidence
The SALPN is an active participant in external groups related to the regulation of LPNs and other professionals, including other regulators, employers, education providers, and other relevant stakeholders.	<ul style="list-style-type: none"> • Demonstrate SALPN's participation in committees, advisory groups and consultation processes. • Demonstrate how the SALPN makes employers aware of the public registry and employer obligation to report terminations on the grounds of incompetence or misconduct.

Standard 6: The SALPN contributes to health care in Saskatchewan through its involvement in the regulatory community

Indicator	Evidence
The SALPN is an active participant and demonstrates leadership in the Network of Interprofessional Regulatory Organizations (NIRO).	<ul style="list-style-type: none"> • Demonstrate active participation and provide support to other regulators in the form of engagement and resource sharing. • Demonstrate that public interest complaint and discipline decisions are shared.

Standard 7: The SALPN maintains cooperative and collaborative relationships to ensure it is responsive to evolving public expectations of regulators and health care professionals

Indicator	Evidence
The SALPN is engaged in the regulatory community in Saskatchewan and beyond.	<ul style="list-style-type: none"> • Demonstrate SALPN's participation in committees, advisory groups, and consultation processes.

Standard 8: The SALPN seeks to understand and responds to changing public expectations in a timely and effective manner

Indicator	Evidence
<p>The SALPN engages with and involves the public in their processes where possible.</p>	<ul style="list-style-type: none"> • Demonstrate the various ways the SALPN engages with the public. • Demonstrate how the SALPN integrates the recommendations of the Truth and Reconciliation Commission into processes. • Demonstrate how the SALPN informs the public about the services of the SALPN and the use of the public registry. • Demonstrate that reviews of the SALPN website are periodically completed to ensure clarity and helpfulness to the public.

Domain: Information Management

Standard 9: Information collected by the SALPN is protected from unauthorized disclosure and cybersecurity threats

Indicator	Evidence
The SALPN demonstrates how it protects against unauthorized disclosure of information.	<ul style="list-style-type: none"><li data-bbox="695 527 1398 663">• Demonstrate that the SALPN has and uses policies and processes respecting how it collects, stores, uses, discloses, destroys and protects the personal information and personal health information it holds.

Domain: Regulatory Policies

Standard 10: Practice requirements, practice standards and practice guidance documents are evidence-Informed, relevant to the practice environment, align with the principles of right-touch regulation² and consider the interest and safety of the public

Indicator	Evidence
<p>All practice requirements, standards and practice guidance documents are up to date, relevant to the current practice environment and consider the interest and safety of the public.</p>	<ul style="list-style-type: none"> • Demonstrate that the SALPN has a policy and processes in place to evaluate its practice requirements, practice standards and practice guidance documents to determine whether they are appropriate, require revision, or if a new direction is required. • Maintain an inventory of SALPN published or endorsed documents. • Demonstrate that the SALPN conducts a stakeholder consultation process in the development of new documents. The consultation process structure is determined through a collective assessment of the potential impact(s) on the LPN, the health care system, and the public. • Demonstrate that the SALPN provides information on when practice requirements, practice standards and practice guidance documents have been newly developed or updated and demonstrate how, in the development or update process, the SALPN took into account evidence and data, the risk posed by the practice, the current practice environment, alignment with other relevant regulators, the public interest, and the results of the consultation process. • Demonstrate that the SALPN measures practice requirements, practice standards and practice guidance documents against the principles of right-touch regulation.

Domain: Eligibility to Practice

² <https://www.professionalstandards.org.uk/what-we-do/improving-regulation/right-touch-regulation>

Standard 11: The SALPN has processes and procedures in place to assess the competency, safety and ethics of those who obtain registration and licensure

Indicator	Evidence
<p>Graduates of a Practical Nursing program are prepared with the entry-level competencies required of the profession.</p>	<ul style="list-style-type: none"> • Demonstrate that an effective Practical Nursing education program approval process is in place for new and existing programs. • Demonstrate the Council's oversight of Practical Nursing programs. • Demonstrate success rates for the licensure examination.
<p>Applicants meet the SALPN's requirements of registration and licensure before they are able to practice.</p>	<ul style="list-style-type: none"> • Demonstrate that checks are carried out to ensure that only those who meet the SALPN's registration and licensure requirements are allowed to practice, including the SALPN's ability to detect fraudulent documents. • Demonstrate that the SALPN regularly reviews its criteria and processes for determining whether an applicant meets its registration requirements against best practice, procedural fairness and the principles of right-touch regulation.
<p>Licensed Practical Nurses continually demonstrate suitability to practice by meeting the requirements of ongoing licensure.</p>	<ul style="list-style-type: none"> • Demonstrate that checks are carried out to ensure that practice currency and other requirements are continually met.
<p>Registration practices are transparent, objective, timely and fair.</p>	<ul style="list-style-type: none"> • Demonstrate that the SALPN assesses registration requirements and processes against the authority prescribed in the legislation and bylaws and the principles of procedural fairness. • Demonstrate that the SALPN ensures the transparency of registration requirements. • Report registration and licensure-related data, including the number of and outcome of appeals.

Standard 12: The SALPN supports the continued competence of Licensed Practical Nurses through requirements of ongoing licensure that address the Standards of Practice, Code of Ethics, competency, professionalism and quality of care

Indicator	Evidence
<p>The SALPN supports Licensed Practical Nurses in applying new or revised practice requirements, standards of practice and practice guidelines applicable to their practice.</p>	<ul style="list-style-type: none"> • Demonstrate how LPNs are assisted in implementing required changes to meet new or revised expectations within individual practice based on the practice standards or practice guidance documents.
<p>The SALPN's Continuing Competency program contributes to safe practice and intends to support self-reflection, life-long learning, and to practice consistent with the Standards of Practice and the Code of Ethics.</p>	<ul style="list-style-type: none"> • Demonstrate how the components of the continuing competency program align with best practice and are evidence-informed.
<p>The SALPN identifies and addresses risks in Licensed Practical Nurse practice and conduct.</p>	<ul style="list-style-type: none"> • Record and report regulatory risks to the SALPN Council. • Demonstrate how the risks of practice are clearly communicated to LPNs. • The methods to address risks in practice are documented and reported to the Council.

Domain: Complaint, Investigation & Discipline

Standard 13: The complaints, investigation and discipline processes are accessible and supportive, and intend to remediate identified competence and ethical concerns

Indicator	Evidence
<p>The SALPN enables and supports anyone to submit a complaint about a SALPN Member.</p>	<ul style="list-style-type: none"> • Demonstrate how the complaints process is easily accessed • Demonstrate that the different stages of the complaints process are clearly communicated and set out on the SALPN's website, including what a complainant can expect at each stage of the process • Respond to 90% of inquiries from the public within five business days. • Demonstrate the activities the SALPN has undertaken in supporting the public during the complaints process • Demonstrate how feedback from complainants and members subject to a complaint is considered
<p>The SALPN enables and supports anyone to submit a complaint about a SALPN Member alleging sexual misconduct/abuse and provides additional support as required.</p>	<ul style="list-style-type: none"> • Demonstrate how the SALPN enables and provides the additional support required to manage complaints alleging sexual abuse/misconduct • Associated staff and Committee members are provided education and training related to trauma-informed investigations • Demonstrate how the SALPN has defined sexual abuse and sexual misconduct
<p>All parties to a complaint and discipline process are kept up to date on the progress of the case, and complainants are supported to participate effectively in the process.</p>	<ul style="list-style-type: none"> • Demonstrate how it is ensured that all parties are regularly updated on the progress of their complaint or discipline case.

Standard 14: All complaints, reports and investigations are prioritized based on public risk, and conducted in a timely manner with necessary actions to protect the public

Indicator	Evidence
The SALPN addresses complaints using a risk-based approach.	<ul style="list-style-type: none"> • Demonstrate an accessible and up-to-date guidance document setting out the framework for assessing risk and acting on complaints, including the prioritization of complaints and investigations. • Demonstrate that complaint processes are measured against the principles of procedural fairness and right-touch regulation.
The SALPN addresses complaints in a timely manner.	<ul style="list-style-type: none"> • Demonstrate that all complaints have been addressed by the Counselling & Investigation Committee within six months. • Demonstrate that all complaints referred to a discipline hearing are concluded and decisions, with reasons, have been distributed within six months.

Standard 15: The SALPN's complaint process is coordinated and integrated

Indicator	Evidence
The SALPN ensures concerns about an LPN are shared with other relevant health regulators and external system partners (employers, police, etc.), when appropriate.	<ul style="list-style-type: none"> • Demonstrate a policy outlining consistent criteria for disclosure and examples of information that has been shared between the SALPN and other relevant system partners, within the legal framework, about concerns with individuals and the results of this work. • Demonstrate compliance with the above-referenced policy.

Standard 16: The SALPN maintains its role to protect the public while supporting and monitoring Licensed Practical Nurses who demonstrate unsatisfactory knowledge, skills and judgement, as identified in the complaints process

Indicator	Evidence
<p>The SALPN effectively addresses issues of professional misconduct and professional incompetence with an approach intended to remediate and correct identified concerns.</p>	<ul style="list-style-type: none"> • Demonstrate the activities undertaken to support LPNs who demonstrate unsatisfactory knowledge, skills and judgement. • Demonstrate the tracking of results of remedial activities an LPN is directed to undertake and assess whether the LPN has subsequently demonstrated the required competency and knowledge while practising

Domain: Measurement, Reporting & Improvement

Standard 17: The SALPN monitors, reports and improves on its performance

Indicator	Evidence
The Council uses Key Performance Indicators (KPIs) to track and review the SALPN's performance and regularly reviews internal and external risks that could impact the SALPN's performance.	<ul style="list-style-type: none"> • There is clear rationale for the adoption of each KPI. • Demonstrate that the Council uses performance and risk information to regularly assess the SALPN's progress and success in fulfilling its legislated responsibilities and strategic objectives.
The Council applies findings from performance and risk reviews.	<ul style="list-style-type: none"> • Where relevant, demonstrate how performance and risk review findings have translated into performance improvement measures.
The SALPN reports publicly on its performance.	<ul style="list-style-type: none"> • Performance results related to SALPN legislated responsibilities and strategic objectives are made public on the SALPN website.