RE: RNAO feedback on practice support services

Dear Anne,

Thank you for the opportunity to provide feedback on the College of Nurses of Ontario (CNO) practice support services. The Registered Nurses' Association of Ontario (RNAO) would like to recommend substantive improvements to the function and quality of practice support services in order to better protect the public.

On December 16, 2016 members received notice through CNO's Standard that the telephone practice line had been closed as part of a pilot project to explore "new and innovative ways to support your practice." Instead of being able to speak with a practice consultant, members are now asked to complete a "practice support intake form" or email practicesupport@cnomail.org with a promise of a response within three business days. Practice support is able to "share relevant practice standards and guidelines" and "direct you to links for appropriate practice standards and guidelines." Most importantly it states, practice support staff cannot "interpret the College's practice standards and guidelines for you," "give you practice or legal advice," or "give you an opinion about a practice scenario."

Individual registered nurses (RN), nurse practitioners (NP), nursing students and members of the public are regularly in touch with RNAO seeking the very kinds of practice support that CNO is now stating it will not provide: interpretation, practice advice, and a regulatory opinion to address their concerns. Many express anxiety and frustration as they feel their situation and questions deserve a mindful review and nuanced response from their nursing regulator in a timely fashion. Three business days is in the view of RNAO an unacceptable wait time for a practice response.

RNAO's Nursing Practice Committee, which is comprised of representatives of four practice specialty groups, has expressed its grave concern at the loss of effective practice advice and consultation to support safe nursing practice that is the core of the regulators' mission to ensure everyone in Ontario benefits from quality nursing services. The committee identified numerous examples of how CNO's previous practice supports had been helpful in the past when a caller has been helped to work through a practice situation or scenario. The most effective supports tended
to be collaborative conversations to help interpret and articulate the College's standards and guidelines and how they apply to the practice concern and situation described by the caller. The opportunity to consult with a knowledgeable nursing colleague has become all the more critical with funding constraints in many organizations resulting in decreasing access to nursing educators, and discipline-specific nurse managers that previously assisted with the articulation and interpretation of nursing practice in clinical practice.

The devolution of CNO's approach to one that seems to mirror an internet search engine linking searchers to documents is in sharp contrast to other jurisdictions that offer practice support. The attached jurisdictional review of Canadian nursing regulators shows Ontario to be the outlier in this search engine model. Unlike CNO's list of what cannot be done, other nursing regulators specifically say they are available to interpret their nursing standards and guidelines. Nursing regulators in Saskatchewan and Prince Edward Island both specify that they provide "advice and guidance to: address identified problems; identify/clarify issues to determine the problem; identify how the client could be affected; document and communicate concerns to appropriate persons; and negotiate resolution and implement changes in practice to meet standards."

The Saskatchewan Registered Nurses' Association (SRNA) describes nine principles, beliefs, and values that guide the operation of their nursing practice team. All nine are available in the attached document, including the primary principle and objective being protection of the public. As not meeting practice standards may jeopardize client care, a nurse who is not meeting practice standards "should be given the opportunity to seek and receive professional support, advice, information and resources." The SRNA includes the critical point that "problems that nurses experience in meeting standards are frequently impacted and complicated by the context in which nurses work."

The jurisdictional review also showed Ontario to be the outlier as the only province/territory not to have telephone as an option for first point of contact for those with practice questions. In fact, six jurisdictions also indicate on their websites that they are available for in-person consultations as another option. All of the jurisdictions have email, website form, and sometimes fax also available as ways to make contact.

Unlike a phone conversation that could be anonymous, the CNO's online practice support form has mandatory fields that include name, email address, and identification of whether a nurse, member of the public, employer, student, applicant, academic, or other health-care provider. Nurses are also asked to provide their registration number, role/title, and facility where they work. Asking for and requiring such information is a disincentive for those seeking to improve their practice, protect the health system, or who might have questions about nursing care they or a loved one has received. This is also in sharp contrast to the philosophy around patient safety and the importance of sharing errors or potential errors in the pursuit of transparency and education to improve practice which results in better clinical outcomes.

Anne, I know we both agree that the vast majority of RNs, NPs, and nursing students are conscientious, life-long learners that want to keep improving their nursing knowledge, skill, and judgment to better serve the people of Ontario. RNAO argues that continuing to provide high quality practice supports, inclusive of the option to speak to a live practice consultant by phone.
in a timely fashion, helps the CNO meet its obligation to strengthen/ensure public safety. We hope that you will seriously consider our feedback and reconsider continuing to provide this very important service to nurses and the public we nurse.

Warm regards,

Doris Grinspun, RN, MSN, PhD, LLD(hon), O.ONT
Chief Executive Officer, RNAO

CC: CNO Council
RNAO Board of Directors

References


