

COLLEGE OF LICENSED PRACTICAL NURSES  
Board Meeting  
December 3rd, 2009

Minutes

Held at  
260-3480 Gilmore Way  
Burnaby, BC,  
(Boardroom)

Meeting number #109

**BOARD MEMBERS PRESENT**

Ms. B. Crockett, Chair, LPN  
Ms. J. Chisholm, LPN  
Ms. V. Gerbrandt, LPN  
Dr. M. Lamoureux, Public Member  
Ms. K. Nduwayo, LPN  
Ms. M. Overton, LPN  
Ms. M. Spina, Public Member  
Ms. J. Vereecken, LPN  
Mr. T. Wharton, Public Member

**STAFF PRESENT:**

Mr. J. Mayr, Executive Director  
Ms. P. McDonald, Deputy Registrar  
Ms. S. Swartz, Recorder

**Invited Guests:**

Ms. Anita Dickson LPN

**Via Teleconference:**

Mr. P. Ruscica, LPN (from 11:30am -12:00pm)  
Ms. S. Trimblett, LPN

**Regrets**

Ms. S. Skratek, Vice Chair, Public Member

**MINUTES**

**Call to Order at 10:00**

**In-Camera Session**

At 10:01am the Board held an in-camera session to approve the Minutes of In-Camera Meeting #107(a) of the Board held on September 9th, 2009. All staff and guests were asked to leave the room. Section 15(5) of the Bylaws states that the reasons for excluding any person from a meeting must be noted in the minutes. In this instance the reason was that personnel matters of a confidential or sensitive nature were disclosed. The Board returned to regular session at 10:15am.

**Motion #1:** THAT the Board approve the release of the In-Camera Minutes to the auditors for the College.

**CARRIED**

**1.0 Agenda**

The members considered the Draft Agenda and agreed to amend the Draft Agenda by:

Moving: Item 8.4 Presentation of the Draft Budget to 11:30am, and

## **5.0 Finance Committee Report**

The Chair of the Finance Committee P. Ruscica attended this portion of the meeting via teleconference. He requested that the Board accept that he delegate the presentation of the Draft Budget to Ms. A. Dickson, a member of the Committee. Ms. Dickson advised the Board that the Finance Committee considered the Draft Budget for the period ending December 31 2010 at its meeting of November 19<sup>th</sup>, 2009 and the Committee recommends approval by the Board.

**Motion #6** – THAT the Draft Budget for the period ending December 31 2010 as approved and recommended by the Finance Committee be accepted by the Board.

The following summary is included to assist readers:

### **College of Licensed Practical Nurses Draft Budget Worksheet**

for the period ending Dec 31, 2010

	<b>Summary</b>	
<b>Total revenue</b>		3,128,000.00
Less interest on investments	<u>30,000.00</u>	
		<b>3,098,000.00</b>
<b>Total Expenses</b>		% of revenue
Total Board and related expense	331,000.00	10.68%
Total Committee per diem and expense	43,500.00	1.40%
Total Committee Activity and projects	277,500.00	8.96%
Total Special Projects	295,000.00	9.52%
Total Postage and courier	35,000.00	1.13%
Total Insurance	104,500.00	3.37%
Total Training and Education	16,000.00	0.52%
Total Resource	20,000.00	0.65%
Total Examination Expense	251,221.58	8.11%
Total Other Expenses	483,500.00	15.61%
Total Salary	<u>1,130,755.27</u>	36.50%
<b>Total Expense before capital</b>		<b>2,987,976.85</b> 96.45%
<b>Total Net Revenue</b>		<b>110,023.15</b> 3.55%
Capital Expense	<u>75,000.00</u>	2.42%
<b>Anticipated Surplus</b>		<b>35,023.15</b> 1.13%

**CARRIED**

## **6.0 Executive Operation Plan**

The Executive Director presented the Executive Operation Plan and the members discussed Outputs and Outcomes. The Board reviewed each item of the proposed plan and prioritized items based on the Planning Session Report.

The Approved Executive Operation Plan is appended to these Minutes.

**Motion #7** – THAT the Executive Operation Plan be accepted.

**CARRIED**

#### **7.0 Report from Chair**

The Chair presented a possible opportunity for the members to attend a workshop in April 2010 entitled "The Self Regulation Challenge: Maximizing Effectiveness, Managing Dysfunction".

#### **8.0 Report from the Executive Director**

##### **8.1 Internal Financial Report**

The Executive Director presented internal financial statements representing quarters 1, 2 and 3 as well as year-to-date figures to the Board for consideration. The Board accepted the statements for filing.

#### **9.0 Committee Reports**

##### **9.1 Inquiry**

M. Spina reported on the activities of Inquiry Committee. She advised the Board that the Chair would be attending the next meeting as an ex-officio member. She further advised that, given the nature of the Committee's activities, the agenda was provided to the Chair to ensure no conflict of interest.

##### **9.2 Quality Assurance**

K. Nduwayo reported on the recent meetings of the Quality Assurance Committee. She advised the Board that Ms. B. Lawrie had joined the Committee as the third member. The Committee has developed a preliminary three-level framework and would continue working towards meeting the objectives of the Health Professions Act.

##### **9.2.1 Immunization Program Update**

K. Nduwayo reported on LPNs becoming certified to administer immunizations and vaccinations, and the BC Centre for Disease Control course. The Committee received a report from Ms E. Hanlon RN, MSN comparing the College's existing immunization course to the BCCDC course. The findings suggest that the BCCDC course meets or exceeds the standards established by the College for certification of LPNs. The Committee will consider some of the suggestions made by Ms. Hanlon at its next meeting.

#### **10.0 New Business**

##### **10.1 Vancouver Island University bursary request**

The members considered a bursary request from Vancouver Island University.

**Action:** The Executive Director to write a letter to Vancouver Island University declining the request.

##### **10.2 Governing Policies Review**

The members discussed reviewing the governing policies and agreed that this activity should not be undertaken until the Bylaws for the College are redeveloped. The general consensus was that many aspects of the policies were made redundant by changes to the Health Professions Act.

##### **10.3 Board Chair and Vice Chair Elections**

by adding:  
Item 9.3 – Chair and Vice Chair elections.  
Item 9.4 – Commendation letter to the Executive Director from the Board.

**Motion #2** – THAT the Agenda be accepted as amended.

**CARRIED**

## **2.0 Approval of the Draft Minutes from the September 17<sup>th</sup> Board Meeting**

The members considered the Draft Minutes of Meeting #108 of the Board held on September 17<sup>th</sup> 2009.

**Motion #3** – THAT the Minutes of the September 17th, 2009 Meeting of the Board be accepted.

**CARRIED**

## **3.0 Presentation by Anita Dickson**

Ms. A. Dickson read a letter from the Professional Practice and Integration Group at Fraser Health Authority, thanking the College for working closely with the professional practice group to ensure that the best health care is delivered to the public. The letter also acknowledged the work of the College with regards to immunization certification.

**Motion #4** – THAT the letter from the Fraser Health Authority be placed on the CLPNBC website.

**CARRIED**

## **4.0 Business Arising from Previous Minutes**

### **4.1 Risk Audit**

P. McDonald reported that all requested materials had been sent to Fasken Martineau.

**Action:** The Chair is to obtain an estimate of the total cost of the Risk Audit from Fasken Martineau and the estimate will be the subject of a meeting of the Board via teleconference to discuss the Risk Audit and approve the expenditure.

M. Spina requested that her concern that the Board should have followed a tendering process and received additional cost estimates for comparative purposes be noted in the Minutes.

### **4.2 Board Planning Session Report**

The members discussed the Board Planning Session Report.

**Motion #5** – THAT the October 2009 Board Planning Session Report be accepted.

**CARRIED**

The approved Board Planning Session Report is appended to these Minutes.

The members discussed the election of Board Chair and Vice Chair. The current Chair's term as a member of the Board expires in September, prior to the end of term as Chair.

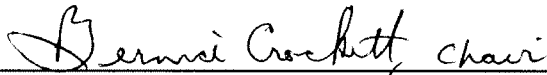
**10.4 Executive Director Letter of Commendation**

The members expressed how impressed they were with many of the activities of the College and acknowledged the work of the Executive Director in improving how the College was perceived by Stakeholders. It was suggested that the Board write a letter of commendation to be presented to the Executive Director acknowledging his efforts on behalf of the College and Licensed Practical Nursing.

**Action:** J. Chisholm to draft a letter for consideration by the Board at the January meeting

**Meeting adjourned at 3:00pm**

**APPROVED BY THE BOARD OF DIRECTORS – January 14, 2010**

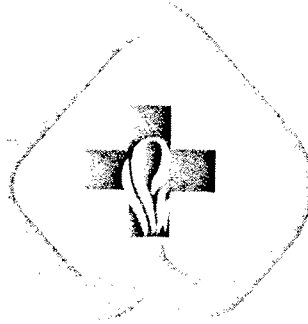
 *Bernice Crockett, chair*

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**BERNICE CROCKETT, CHAIR**

**Appendices:**

The 2009 Board Planning Report and Operational Plan are part of the Minutes of this meeting.



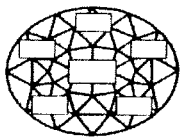
# College of Licensed Practical Nurses of British Columbia

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October 2009 Board Planning Session

**Report**

**27 October 2009**



*Ross Ramsey  
Associates Ltd.*

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## ***Executive Summary***

The College of Licensed Practical Nurses of BC (CLPNBC) held a Board planning session at the Vancouver Airport Marriott Hotel on October 22<sup>nd</sup>, 2009

Preparatory discussions were held with Ms. Bernice Crockett (Chair), Dr. Sylvia Skratek (Vice-Chair) and Mr. John Mayr (Executive Director/Registrar of the College), to identify deliverables for the planning session. A draft agenda was distributed to all participating Directors for comment prior to the session. The final agenda was primarily dedicated to identifying strategic priorities and related goals that would be subsequently translated into an Operational Plan by the Executive Director/Registrar. The session, to a lesser extent, considered governance issues.

### **Participating Directors included:**

Bernice Crockett, Chair, LPN  
Virginia Gerbrandt, Director, LPN  
Margaret Spina, Director  
Muriel Overton, Director, LPN  
Shelley Trimblett, Director, LPN  
Jillian Chisholm, Director, LPN

Dr. Sylvia Skratek, Vice-Chair  
Thomas Wharton, Director  
Kathy Nduwayo, Director, LPN  
Paul Ruscica, Director, LPN  
Janet Vereecken, Director, LPN

### **Regrets:**

Dr. Marvin Lamoureux, Director

### **Support personnel included:**

John Mayr, Executive Director/Registrar  
Elaine Baxter, Senior Practice Consultant  
Sascha Swartz, Executive Assistant  
Ross Ramsey

This document provides a summary of major outcomes of the CLPNBC Board planning session.

## ***Session Opening***

Bernice Crockett, Chair, welcomed all Directors to the planning session. She noted that her goal for the day was to have the Board provide clear direction to staff and she invited active participation from all Directors to ensure that goal was achieved. A bit later, John

Mayr, Executive Director/Registrar, added his welcoming comments by noting that he looked forward to collaborating with the members of the Board to positively embrace change and provide clear direction to staff. He specifically commented on the importance of planning for health regulatory organizations and encouraged all members to ask questions and participate fully in the session. Mementos with inspirational words to guide them in their planning were provided to all Directors.

### ***Agenda Review***

Ross Ramsey reviewed how the agenda was created. He thanked Bernice Crockett, Sylvia Skratek (Vice-Chair) and John Mayr for their guidance in compiling the agenda. He also thanked Sascha Swartz for all her support with session logistics. He noted that while a draft of the agenda had been distributed by email to all Directors for comment during the previous week, he wanted to be sure that the draft agenda was indeed agreeable to all participants. Accordingly, he reviewed the agenda and received consent to follow it for the day.

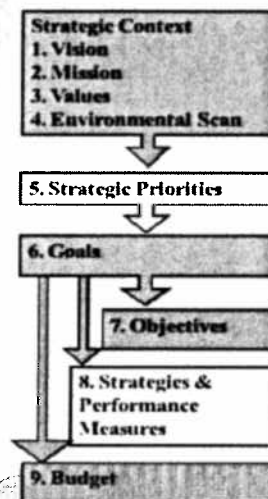
### ***Planning Presentation***

Ross Ramsey distributed two handouts as background to the presentation on strategic planning:

1. A copy of the PowerPoint presentation slides
2. Selected pages from a Board Resourcing & Development publication from the Premier's Office (2001). This document is used by the College during orientation of new Directors.

A strategic planning model was presented that depicts a complete planning cycle from strategic to operational to results management.

## Strategic Plan Framework



Ross Ramsey Associates Ltd.

The following key points were made during the presentation:

1. The definition of strategic planning is: A framework to guide and implement strategic thinking, direction and action that leads to the attainment of consistent and planned results. Because of its nature, it is a framework that guides action, not the identification of a black and white determination of specific action.
2. Strategic planning, while clearly the purview of the Board, should be viewed as a collaborative venture and must include staff input.
3. Operational planning, while clearly the purview of staff, must include discussion with the Board to ensure that what will be done in the next fiscal year adequately achieves the Board's strategic intentions within the fiscal framework of the organization while keeping in mind that strategic direction is longer term and all of it is not likely achievable in one fiscal year.
4. While the Board has all accountability and authority and must ensure staff accountability, effective organizations result when a Board/staff partnership is created that is based on mutual respect.
5. The College previously identified Vision, Mission and Core Values. That soil would not be re-tilled during the planning session. The focus of the session was to identify strategic priorities, and related goals that would be translated by the Executive Director/Registrar into an Operational plan.

### ***CLPNBC Planning Context***

The College, when planning, must keep in mind its duties and objects as stated in the HPA.

16 (1) It is the duty of a college at all times

- (a) to serve and protect the public, and
- (b) to exercise its powers and discharge its responsibilities under all enactments in the public interest.

(2) A college has the following objects:

- (a) to superintend the practice of the profession;
- (b) to govern its registrants according to this Act, the regulations and the bylaws of the college;
- (c) to establish the conditions or requirements for registration of a person as a member of the college;
- (d) to establish, monitor and enforce standards of practice to enhance the quality of practice and reduce incompetent, impaired or unethical practice amongst registrants;
- (e) to establish and maintain a continuing competency program to promote high practice standards amongst registrants;
- (f) to establish, for a college designated under section 12 (2) (h), a patient relations program to seek to prevent professional misconduct of a sexual nature;
- (g) to establish, monitor and enforce standards of professional ethics amongst registrants;
- (h) to require registrants to provide to an individual access to the individual's health care records in appropriate circumstances;
- (i) to inform individuals of their rights under this Act and the *Freedom of Information and Protection of Privacy Act*;
- (i.1) to establish and employ registration, inquiry and discipline procedures that are transparent, objective, impartial and fair;
- (j) to administer the affairs of the college and perform its duties and exercise its powers under this Act or other enactments;
- (k) in the course of performing its duties and exercising its powers under this Act or other enactments, to promote and enhance the following:

- (i) collaborative relations with other colleges established under this Act, regional health boards designated under the *Health Authorities Act* and other entities in the Provincial health system, post-secondary education institutions and the government;
- (ii) interprofessional collaborative practice between its registrants and persons practising another health profession;
- (iii) the ability of its registrants to respond and adapt to changes in practice environments, advances in technology and other emerging issues.

John Mayr presented a draft SWOT. Following review and discussion by the Board the SWOT was finalized as follows:

#### **Internal Strengths**

- Organizational commitment to improved customer service
- Alignment of board/committee tasks with Legislated authority
- Increased internal capacity for understanding HPA and other legislation
- New accounting/financial reporting system
- Improved IT infrastructure (hard and software)
- Increasing number of registrants
- Strong financial position
- Good understanding of policy governance
- Newly formed Quality Assurance department
- Environmental awareness
- Move to electronic systems
- Strong leadership

#### **Internal Weaknesses**

- Staff capabilities
- Extent of and resistance to change
- Low participation rate by registrants in elections and College activities
- Existing national examination
- Existing Bylaws, policies (issues related to ESL challenges was identified when discussing this weakness)
- Outdated standards practice guidelines
- Lack of experience in policy development

- Database
- Lack of understanding of role of the College
- Continuing difficulty adhering to governance model
- Lack of clear understanding of roles
- Reluctance to communicate history
- Number of complaints received by the College

#### **External Opportunities**

- Relationship with Ministry of health Services
- Clarity of HPA
- Increased utilization of LPNs
- New Regulation
- Restricted Activities
- Advanced scope of practice areas - standards
- Increased collaboration with other health professionals
- Increased professional image of College and registrants
- LPNs in leadership roles (Professional Practice and Integration)
- Wage differential between LPNs and RNs
- Ratio models from other Canadian jurisdictions
- Average age of RNs

#### **External Threats**

- Stakeholder perception of CLPNBC
- Number of Private Educational Institutions
- Cost of private educational programs
- Economy / recession
- Displacement of RNs by LPNs
- Professional protectionism
- Lack of development opportunities for registrants
- Expanding scope of practice in other jurisdictions
- Health Professions Review Board
- Lack of effective professional association
- Different regulatory models in other provinces that combine professional advocacy and regulation.
- Pandemic
- Ontario model of nurse regulation (one college)
- Public perception of LPNs

### **Driving Forces**

Following discussion of the entire SWOT, key Driving Forces (those external forces with the potential of having major impact on the College over the planning period) were identified for special consideration in the forthcoming Operational Plan:

1. Professional protectionism
2. Expanding scope of practice in other jurisdictions
3. Health Professions Review Board

### ***Strategic Priorities***

Directors reviewed previous planning session outcomes from 2007 and then identified 3 strategic priorities for the College. Subsequent discussion identified goal ideas (as opposed to the actual goal statements) for each of the strategic priorities. Once the Board has reviewed and approved/revised this report, goals statements and specific measurable objectives can be identified in the Operational Plan.

## **#1 – Serve and Protect the Public**

### **Goal Ideas**

- (a) Superintending practice of the profession;
- (b) Governing registrants according to the Act, regulations and bylaws;
- (c) Establishing conditions or requirements for registration of College members;
- (d) Establishing, monitoring and enforcing standards of practice that enhance quality of practice and reduce incompetent, impaired or unethical practice;
- (e) Establishing and maintaining a continuing competency program;
- (f) Establishing a patient relations program that prevents professional misconduct of a sexual nature;
- (g) Establishing, monitoring and enforcing standards of professional ethics;
- (h) Requiring registrants to provide to an individual access to the individual's health care records in appropriate circumstances;
- (i) Informing individuals of their rights under the Act and the *Freedom of Information and Protection of Privacy Act*;

(i.1) Establishing and employing registration, inquiry and discipline procedures that are transparent, objective, impartial and fair;

(j) Administering affairs of the college, performing duties and exercising its powers;

(k) Promoting and enhancing the following:

(i) collaborative relations with other colleges established under this Act, regional health boards designated under the *Health Authorities Act* and other entities in the Provincial health system, post-secondary education institutions and the government;

(ii) interprofessional collaborative practice between its registrants and persons practising another health profession;

(iii) the ability of its registrants to respond and adapt to changes in practice environments, advances in technology

## **#2 – Achieve Professional Recognition**

### **Goal Ideas**

1. Identifying and determining if changing the legal designation for the profession can and/or should be achieved.
2. Achieving effective Regulations under the HPA.
3. Increasing LPN leaders (include Board Ambassador objectives)
4. Maintaining an independent regulatory College for LPNs
5. Developing advanced competencies (include Leadership objectives)
6. Increasing member connectivity to the profession (exciting members about their profession)
7. Increasing government recognition of the profession
8. Increasing public recognition of the profession
9. Increasing collaborative strategies with the educational system (see 1(k)(i) re: possible duplication.
10. Increasing collaborative strategies with other health professions (see 1(k)(ii) re: possible duplication.

## **#3 – Improve Organizational Effectiveness**

## **Goal Ideas**

1. Roles
  - a. Clarify Board Director accountabilities and authorities
  - b. Clarify Board Officer accountabilities and authorities
  - c. Clarify Board Committee accountabilities and authorities
  - d. Clarify Board/ED accountabilities and authorities
2. Implementing Board development strategies
3. Implementing staff development strategies
4. Identifying and implementing organizational capacity improvements

## ***Board and Executive Director Roles***

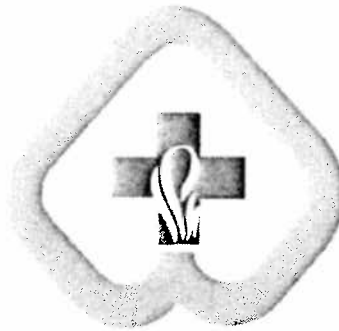
The session concluded with a presentation on governance that focused on the distinctions between the role of the Board and the role of the Executive Director/Registrar.

The following key points were discussed:

1. The Board sets the tone of an organization. A tone that conveys a collaborative partnership between the Board and the Executive Director/Registrar is most conducive to effective communication and organizational performance.
2. Clarifying accountability and authority is the most effective way to remove noise, duplication and confusion in an organization.
3. The Board acts as a whole and specifically needs to be very clear on the accountabilities and authorities of Officers and the Executive Director/Registrar.
4. Identifying what a person/committee cannot do without reference to the Board is often the most powerful way to identify authority and empower creativity.
5. A Board has 5 governance priorities: external linkage, fiduciary and ethical accountabilities, strategic planning, Board performance and Executive Director/Registrar performance.
6. The Board has one staff person, the Executive Director/Registrar.
7. The Executive Director/Registrar provides leadership to the organization and is accountable for operational planning, organizing, staffing, directing and controlling outcomes.

## ***Next Steps***

It was concluded that session outcomes would be compiled into a final report for Board and Executive Director/Registrar review. The results of that review would provide direction to Executive Director/Registrar in developing the College's next Operational Plan.



College of Licensed Practical Nurses of British Columbia

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October 2009  
Executive Operational Plan

**Draft**  
**December 2009**

Three Strategic Priorities were identified at the recent Board Planning session. Outputs and Outcomes for each follow below, as do the relevant key Driving Forces - those issues most likely to have a major impact on the College over the planning period (Professional Protectionism, Expanding Scope of Practice in other jurisdictions and Health Professions Review Board).

## ***Strategic Priorities***

### **#1 – Serve and Protect the Public**

#### **Goal Ideas**

1. (a) Superintending practice of the profession;
1. (b) Governing registrants according to the Act, Regulations and Bylaws;
1. (c) Establishing conditions or requirements for registration of College registrants;
- 1.(d) Establishing, monitoring and enforcing standards of practice that enhance quality of practice and reduce incompetent, impaired or unethical practice;
1. (e) Establishing and maintaining a continuing competency program;
1. (f) Establishing a patient relations program that prevents professional misconduct of a sexual nature;
1. (g) Establishing, monitoring and enforcing standards of professional ethics;
1. (h) Requiring registrants to provide to an individual access to that individual's health care records in appropriate circumstances;
1. (i) Informing individuals of their rights under the Act and the *Freedom of Information and Protection of Privacy Act*;
1. (j) Establishing and employing registration, inquiry and discipline procedures that are transparent, objective, impartial and fair;
1. (k) Administering affairs of the College, performing duties and exercising its powers;
1. (l) Promoting and enhancing the following:
  - (i) collaborative relations with other colleges established under this Act, regional health boards designated under the *Health Authorities Act* and

other entities in the Provincial health system, post-secondary education institutions and the government;

(ii) inter-professional collaborative practice between its registrants and persons practicing another health profession;

(iii) the ability of its registrants to respond and adapt to changes in practice environments, advances in technology

Outputs (Strategic Priority #1) Key Driving Forces:

- Professional Protectionism
- Health Professions Review Board

**A.1- Output** Amended Bylaws

- A.1.a Outcome – amended bylaws approved by Ministry of Health Services
- A.1.b. Outcome – All processes comply fully with Health Professions Act and all other legislation.
- A.1.c. Outcome – Increase capacity for decisions and reasons.
- A.1.d Outcome – reduce exposure to the Health Professions Review Board.

**A.2 –Output** Have all members of the Discipline and Inquiry Committees attend the British Columbia Council of Administrative Tribunals Administrative Justice-Practice and Procedure course.

- A.2.a. Outcome - Conclusive, valid and defensible decisions supported by well written decisions with reasons.
- A.2.b. Outcome - Reduce exposure to the Supreme Court, Ombudsman, and other organizations.

**A.3 Output** Complete policies and procedures for phase 1 of Quality Assurance program.

- A.3.a Outcome – Complete operational policies for Tier 1 and 2 activities
- A.3.b Outcome – Establish data set for QA program record keeping.
- A.3.c. Outcome – Upgrade Super Office Database for secondary protected area.
- A.3.d. Outcome – develop assessment/ monitoring tools.

**A.4 Output** Implement facility based QA program (maximum 3 sites)

- A.4.a. Outcome – Identify sites and contact(s), develop QA proposal, prepare communications plans.
- A.4.b. Outcome - Launch initial sites for QA program Tier 1 activities.

**A.5 Output** Redevelop Patient Relations Program

A.5.a. Outcome – New Patient Relations plan.

A 5.b. Outcome – Develop and implement Communications Strategy.

## **#2 – Achieve Professional Recognition**

### **Goal Ideas**

1. Identifying and determining if a name change for the Profession can and should be achieved;
2. Achieving effective Regulations
3. Increasing LPN leaders (include Board Ambassador objectives)
4. Maintaining a separate College
5. Developing advanced competencies (include Leadership objectives)
6. Increasing member connectivity to the Profession (exciting members about their profession)
7. Increasing government recognition of the Profession
8. Increasing public recognition of the Profession
9. Increasing collaborative strategies with the educational system (see 1(k)(i) re: possible duplication.
10. Increasing collaborative strategies with other health professions (see 1(k)(ii) re: possible duplication.

### Outputs (Strategic Priority #2) Key Driving Forces:

- Professional Protectionism
- Expanding Scope of Practice in other jurisdictions
- Health Professions Review Board

**B.1 Output** Achieve updated Regulation – Restricted Activities Model

B.1.a. Outcome – New Regulation

**B.2 Output** Establish Limits and Conditions

B.2.a. Outcome – new document based on Regulation establishing limits and conditions for LPNs working with and without an order.

B.2.b. Outcome – communications strategy for restricted activities regulation.

**B.3 Output** Professional growth and support tools for new regulation

- B.3.a. Outcome – Web based tools to facilitate integration of Regulation
- B.3.b. Outcome – Paper based support tools to facilitate integration of Regulation
- B.3.c. Outcome – Develop support tools for professional practice and integration units
- B.4 **Output** Finalize Baseline competencies
  - B.4.a. Outcome – Ministry approval received, production and distribution
- B.5 **Output** - Redevelop all practice guidelines
  - B.5.a. Outcome – Update all practice guidelines
  - B.5.b. Outcome - Develop new practice guidelines as required
- B.6 **Output** - Develop Advance Practice Competencies
  - B.6.a. Outcome – Identify priority areas for advance practice competencies
  - B.6.b. Outcome – Develop advance practice competencies, validate and distribute
- B.7 **Output** - Redevelop website
  - B.7.a. Outcome – New website with greater flexibility and usability
- B.8 **Output** - Increase influence on National Regulatory Council
  - B.8.a. Outcome – Increased contribution by CLPNBC towards national activities  
Pan Canadian Baseline (entry level) competencies  
Pan Canadian Code of Ethics
- B.9 **Output** - Participate with CCPNR to implement IEN Assessment
  - B.9.a Outcome – Partner with federal/provincial governments- FQR initiative
- B.10 **Output** - Maintain relationships with BCCAT and HRO
  - B.10.a. Outcome – ED to continue as member of the Education Committee.
  - B.10.b. Outcome - Assist in the development of Staff Foundations Course
- B.11 **Output** - Explore alternative examination options.
  - B.11.a. Outcome – Become an associate member of the National NECB
  - B.11.b. Outcome – Explore options for competency based assessment.

### #3 – Improve Organizational Effectiveness

#### Goal Ideas

1. Roles
  - a. Clarify Board/ED accountabilities and authorities
  - b. Clarify Board Officer accountabilities and authorities
  - c. Clarify Board Committee accountabilities and authorities
2. Implementing Board development strategies
3. Implementing staff development strategies
4. Identifying and implementing organizational capacity improvements

#### Outputs (Strategic Priority #3) Key Driving Forces:

- Professional Protectionism
- Expanding Scope of Practice in other jurisdictions
- Health Professions Review Board

C.1 **Output** - Redevelop and link board policies with best practices/ governance model.

C.1.a. Outcome – Redevelop policies within the planning framework that:

1. Reflect and respect the partnership between the Board and the Executive Director/Registrar.
2. Establish clear accountability and authority for the Board, its Officers, and the Executive Director.
3. Implement principles to ensure that the Board acts as a whole.
4. Establishes reporting mechanism and accountability for the Board's 5 governance priorities: external linkage, fiduciary and ethical accountabilities, strategic planning, Board performance and Executive Director/Registrar performance.
5. That the Executive Director/Registrar provides leadership to the organization and is accountable for operational planning, organizing, staffing, directing and controlling outcomes.

C.2 **Output** - Establish a formal reporting and monitoring system for each Board meeting.

C.2.a Outcome – Forms are used by the Board and Committees.

C.3 **Output** - Executive Director to continue change initiative to streamline operations and increase capacity.

C.4 **Output** - Develop strategy to increase Nurse Practice Consultant role.

C.4.a Outcome – ED will explore options for regional nurse practice consultant model.

