

# CONTINUING COMPETENCE PROGRAM

Instruction Guide for  
Manitoba's Licensed Practical Nurses

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College of Licensed Practical  
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## Purpose

As the regulator for Manitoba's licensed practical nurses (LPNs), the role of the College of Licensed Practical Nurses of Manitoba (CLPNM) includes providing information and resources to help LPNs meet their professional obligations.

This document acts as a companion to the CLPNM's Practice Direction on the Continuing Competence Program [available on the CLPNM website](#). While the practice direction sets out the requirements of the Continuing Competence Program (CCP), this instruction guide provides more detailed information to help LPNs meet the requirements.

## Introduction

Lifelong learning is essential to a nurse's continuing competence. The CCP ensures that Manitoba's LPNs retain and continuously build their knowledge, judgment and skill. As an LPN, participating in the program will help you to ensure you meet and maintain the level of competence required for safe practice in your role. Participating in the program will also help you to build your competence over the course of your career and remain up to date on evolving evidence and best practice in your field.

All Manitoba LPNs participate in the CCP each year. Each year, as part of your annual registration renewal application, you will be asked to confirm that you have completed all requirements of the CCP during the previous year.

The CLPNM also conducts an annual review of its registrants' CCP activities, referred to as the CCP Audit. Each year, approximately 12% of active practising LPNs are selected to participate in the audit.

The CCP Audit supports the CLPNM in meeting its mandate to ensure that LPNs provide safe, competent and ethical nursing care. The CCP Audit also assists you in meeting your professional obligation to maintain and build your competence relevant to your specific areas of practice.

## About the Program

In order to maintain and continuously build their competence, all Manitoba LPNs have a professional responsibility to:

- engage in active practice of at least 1000 hours in a four-year period
- engage in self-assessment and practice reflection
- engage in learning activities, including those aimed at
  - ensuring the nurse possesses the competence needed for safe practice in their practice area
  - augmenting nursing competence and improving quality of care over time, and
  - developing an understanding of professional responsibilities, and
- maintain a professional portfolio.

More information about how to meet the requirements of each component of the program is provided below in this document.

As one of Manitoba's LPNs, participating in your profession's CCP will help you provide quality care to your clients, while meeting your profession's Standards of Practice and Conduct.

These standards state that, as an LPN, you must:

- Demonstrate the knowledge, skill, and professional and clinical judgment necessary for practising in a safe, competent, compassionate, and ethical manner.
- Identify potential and actual risk and take action to safeguard clients.
- Keep your knowledge and skills up to date by regularly taking part in educational and professional development activities that aim to maintain, develop, and enhance competence, relevant to your practice area, including compliance with the CLPNM Continuing Competence Program.
- Collaborate with colleagues to evaluate the quality of your practice and that of the health care team.

## Practice Hours

Practice hours provide work experience that contributes to the knowledge, skill and judgment of an LPN. In order to maintain and build your competence, you must practise a minimum of 1000 hours in a four-year period. For your practice hours to qualify, you must have been on the CLPNM active practising register at the time the hours were accrued.

Each year, when you renew your registration, you are asked to self-declare the hours you practised as an LPN between December 1 and November 30. You may also be asked to have your hours verified by your current and previous employers.

For more information on Verification of Hours, please see page 30 of this document.

## Self-Assessment

Self-assessment is an opportunity to reflect on your nursing practice, as well as your knowledge of your professional standards and code of ethics and identify areas for further learning.

As part of your CCP requirements, you will complete a self-assessment each year using the CLPNM's CCP Annual Self-Assessment Tool available [on the CLPNM website](#).

Using this tool to guide the reflective process, you can identify areas of your practice that require an increase in knowledge, judgment, or skill, areas of interest where your practice may expand, and the areas in which further education may be needed to enhance competence. This assessment is based on individual reflection, and the outcome of this process will differ between

individual LPNs.

The Annual Self-Assessment Tool highlights the 6 major competency domains and the 47 competency subdomains which make up the nursing competencies for LPNs in Manitoba. These competency domains and subdomains are derived from the CLPNM document Nursing Competencies for Licensed Practical Nurses in Manitoba. To complete your self-assessment, follow the full list of instructions and tips contained within the tool.

When conducting your self-assessment, you are encouraged to review the following resources:

- Nursing Competencies for Licensed Practical Nurses in Manitoba
- The Standards of Practice and Conduct
- The CLPNM Code of Ethics
- CLPNM Practice Directions
- *The Licensed Practical Nurses Act* including section 2, Scope of Practice

Each of these resources is available [on the CLPNM website](#).

If you are selected for the CCP Audit, your completed self-assessment does not need to be submitted for review by the CCP auditors, unless you are specifically directed to submit it. The CLPNM may ask you to submit your completed self-assessment tool for review at any time, including during the CCP Audit.

Self-employed LPNs must also, on an annual basis, assess the risks associated with their practice. Read more about this under LPNs in Self-Employed Practice, on page 22.

## Learning Activities

The CCP includes three types of learning activities.

- Quality Improvement Learning Plans
- An Annual Professional Learning Module
- Quality Assurance Learning Plans\*

\*Only required of the LPNs selected for the Quality Assurance (QA) Audit (Category 2).

Read on for more information about each.



Quality Improvement (QI)

- Learning goal: chosen by the LPN.
- Objective: to provide a framework that supports Manitoba's LPNs to build their competence and improve the quality of their care over the course of their careers.
- Who: all LPNs each year.
- What: one completed learning plan per year, based on the LPN's own self-assessment.
- Verified through: the annual CCP Audit.



Annual Professional Learning (APL)

- Learning goal: determined by the CLPNM.
- Objective: to provide LPNs with regular education on topics related to the legislation and professional standards that guide and direct their practice.
- Who: all LPNs each year.
- What: one mandatory online learning module per year. Topics will vary.
- Verified through: declaration on registration renewal and (starting 2024) through a mandatory quiz.



Quality Assurance (QA)

- Learning goal: determined based on practice feedback.
- Objective: to obtain assurance that LPNs who practise in settings or circumstances associated with added risk have the competence to do so safely.
- Who: LPNs selected by the CLPNM. Selection will be weighted towards LPNs who practise in circumstances associated with higher risk. Some LPNs will be randomly selected.
- What: practice feedback + one additional learning plan based on the feedback.
- Verified through: the annual CCP Audit.

## Quality Improvement Learning Plans

Each year, you will complete at least one (1) learning plan that advances your professional competence and is relevant to your current or future area of practice. This learning plan, which is required of all LPNs each year, is referred to as the Quality Improvement (QI) Learning Plan.

A learning plan is a personalized action plan designed to help you set, meet and evaluate your professional development goals.

The objective of the QI Learning Plan is to provide a framework that supports you to build your competence and improve the quality of your nursing care over the course of your career.

A completed QI Learning Plan is comprised of the following five components:

- Learning Goal
- Planned Interventions
- Completed Interventions
- Impact on Practice
- Evaluation of Learning

You must keep a record of your annual learning plans for the current year and at least the previous four years. The CLPNM may ask to review these records to verify your CCP participation any time, whether or not you are selected for the CCP Audit.

If you choose to do so, you may keep records of your learning plans using the template that is available to you within your profile in the CLPNM's online registration system. To access the learning plan template:

- [Login here](#).
- Click on the "My Learning" tab along the left-hand side.
- If you need further guidance on how to complete and save the form, review the instructions available [here](#).

Note that the "My Learning" tab is meant as a place where you can document your progress, for your own records, throughout the year. If you were selected for the CCP Audit, you must still submit your learning plan for the audit. Please refer to instructions starting on page 24.

You must complete at least one QI Learning Plan each year that you hold registration with the CLPNM, whether or not you are selected for the CCP Audit.

## 1. Learning Goal

You will choose your learning goal after completing your annual self-assessment (see page 2), reflecting on your current or future area(s) of practice, and identifying the competencies required to meet client care needs in that environment.

Your learning goals should be SMART.

S	Specific to your learning needs and applicable to your current or future nursing practice.
M	Measurable, real objectives that can be achieved through planned learning.
A	Attainable, accessible learning that can be accessed by you where you are.
R	Realistic for you to fit your learning needs, your life, and work environment.
T	Timely and achievable within the next few months or within the year.

Examples of SMART learning goals:

<input checked="" type="checkbox"/>	To increase my knowledge and ability to identify risk factors and symptoms of decreased renal function in clients with acute kidney injury (AKI) by July 2024.
<input checked="" type="checkbox"/>	I want to identify techniques to assess and intervene effectively with suicidal clients who present in the emergency department by August 2024.
<input checked="" type="checkbox"/>	By June 2024, I want to increase my knowledge, skill and ability to care for a client experiencing Lewy body dementia (LBD).

Acceptable QI learning goals should:

- Deepen and broaden your nursing knowledge
- Relate to your current area of practice, or an area of practice you plan to move into in the coming year
- Expand your body of knowledge and build your competence as a nurse
- Help you meet the needs of your current or future client population

The following are **not** acceptable as QI learning goals:

- Reviewing entry-level knowledge that is expected of all LPNs
- Reviewing material that you previously learned
- Renewing a certification
- Goals that are not client-centred such as personal goals
- Goals that do not augment your nursing competence (knowledge, judgment and/or skill)
- Training that is required as a basic condition of employment in most nursing practice

environments, including but not limited to:

- Cardiopulmonary Resuscitation / Basic Life Support
- Workplace Hazardous Materials Information System
- Lifts and Transfers
- Personal Protective Equipment
- Hand Hygiene
- The Personal Health Information Act
- Violence Prevention
- Transfusion Best Practice
- Respectful Workplace Policies

Note that employer-mandated learning is acceptable as a QI learning goal if the education builds upon basic nursing knowledge and provides you with the competence needed to practise in a more specialized or higher acuity practice area. Examples of learning that might be employer-mandated, but which is also acceptable for the purposes of the CCP include:

- Advanced Cardiac Life Support (ACLS)
- Trauma Nursing Core Course (TNCC)
- Pediatric Advanced Life Support (PALS)
- Neonatal Resuscitation Program (NRP)
- Canadian Triage and Acuity Scale (CTAS)
- Nursing Foot Care
- Post-Basic Wound Care
- Nursing Nephrology

These programs will be accepted as QI learning goals when the competencies provided are new to the individual nurse. Renewing a certification or refreshing previous knowledge will not be accepted as QI learning goals.

Should you have any questions about acceptable QI learning goals, additional education, or completed learning activities, please contact the [CLPNM Practice Department](#).

## 2. Planned Interventions

Once you have set your learning goal for the year, you will plan methods of acquiring the new knowledge, skill and/or experience you need to achieve that goal.

Options to consider include:

- Attending education sessions, courses, workshops, in-services, or conferences
- Completing a certificate program
- Consulting with or observing other health care professionals in the workplace and carrying out your own research to validate what you learned
- Reading current peer-reviewed journal articles, textbooks or other scholarly publications

If you plan to access information posted on websites, make sure to evaluate the quality of the information. Was the information posted by a credible person or organization, with the credentials

necessary to speak as an authority on the topic? If the answer is no, or you are not sure, stick to scholarly sources such as peer-reviewed articles and textbooks.

### 3. Completed Interventions

Throughout the year, you will update your learning plan by listing the specific learning activities you completed to meet your goal.

Make sure to record details such as:

- Dates and locations of workshops, conferences, or courses; the names of instructors or presenters; and the organizations that delivered the programs
- Proper references for any textbooks or articles you reviewed including author, title, volume or edition, and date of publication
- The website address of any website you consulted, the name of the individual or organization that posted the information, the date you accessed it, and any other information that validates the website as a credible source of nursing knowledge

If you are selected for the CCP Audit, you will need to demonstrate that the learning activities described in your learning plan were completed during the registration year that is coming to an end. For example, if you are renewing your registration in the fall of 2023 for the 2024 registration year, and you were selected for the 2023 CCP Audit, you will be required to submit a learning plan that identifies the learning activities you completed during the 2023 registration year.

### 4. Impact on Practice

As the year goes on and your learning goal is met, you will add to your learning plan, describing the impact of the newly gained knowledge on your practice.

Be sure that you document in your learning plan both:

- what you learned, and
- how your nursing practice has changed or will change as a result of your learning.

To help you describe the impact of your learning on your practice, reflect on your learning and ask yourself the following questions:

- How or when will you apply your new learning to your practice and client care?
- How has your client care changed and improved as a result?
- How would a client experience care from you differently after your learning?
- How specifically are you better able to respond to your client's needs?
- What conditions or risks in your practice are you now able to identify that you might not have identified in the past?

## 5. Evaluation of Learning

Finally, before completing your learning plan, you will evaluate your overall sense of your learning experience. Evaluating your learning might offer you ideas for additional learning activities to complete next year. An evaluation tool is included within the Learning Plan Template. Examples of completed learning plans are available [on the CLPNM website](#).

### Annual Professional Learning (APL) Modules

Annual professional learning requirements ensure that LPNs remain current and knowledgeable about the legislation, regulations, by-laws, professional standards, and practice directions that impact and guide their nursing practice.

All LPNs will complete a mandatory learning module (approx. 60-90 minutes) each year on a topic related to the legislation, practice and standards of their profession. The topic will be determined by the CLPNM and will vary from year to year. Each APL module will include a quiz to reinforce learning. All LPNs will complete the same learning module each year.

The APL module will become available by the end of May of each year, and will be accessible online. You have the option to complete it at a time that is convenient for you as long as you complete it prior to the next registration renewal deadline in the fall.

### Quality Assurance Learning Plans

LPNs who are selected for the Quality Assurance (QA) Audit (Category 2) are required to complete a second learning plan in addition to the QI Learning Plan that all LPNs must complete. QA Learning Plans help LPNs ensure they have the competence necessary to practise safely in their current practice area.

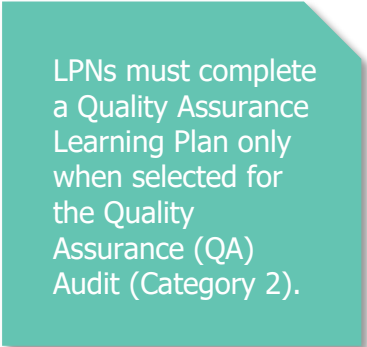
Unless you have been selected for the QA Audit, the information in this section does not apply to you.

LPNs will be advised, via email from the CLPNM, by mid-June each year if they have been selected for the QA Audit (Category 2). Be sure your email address on record with the CLPNM is up to date and that you check it regularly.

LPNs selected for the QA Audit will start their QA Learning Plan in the year they are selected for the QA Audit. They will complete the QA Learning Plan the following year.

QA Learning Plans include the same five components as QI Learning Plans.

- Learning Goal
- Planned Interventions
- Completed Interventions



LPNs must complete a Quality Assurance Learning Plan only when selected for the Quality Assurance (QA) Audit (Category 2).

- Impact on Practice
- Evaluation of Learning

Although QA Learning Plans look similar to QI Learning Plans, the focus of these learning plans is different.

	Quality Improvement (QI) Learning Plan	Quality Assurance (QA) Learning Plan
Learning Goal Identified Through	Self-Assessment.	Practice Feedback (In most cases, from your employer).
Focus of Learning Goal	Developing your competence beyond entry level to better meet your client needs and to improve the quality of your nursing care.	Confirming you possess the competence required to practise safely, and to mitigate practice-related risks to your clients.
Entry-Level Competencies Acceptable as Learning Goals?	No. The focus must be on developing your competence beyond that of an entry level LPN.	Yes, if the practice feedback identifies you would benefit from refreshing your entry-level nursing knowledge, judgment and skill.

If you have been selected for the QA Audit (Category 2), and therefore must complete a QA Learning Plan, your instructions for selecting your

- learning goal, and
- planned learning interventions,

will differ from the instructions related to QI Learning Plans. Review the following pages for information on how to select appropriate QA learning goals and learning interventions, based on your practice feedback.

All instructions for documenting your

- completed learning interventions
- impact on practice, and
- evaluation of learning,

which can be found starting on page 8, apply when developing your QA Learning Plan. To avoid repetition, those instructions are not repeated in this section.

## Practice Feedback

You will select your QA learning goal after receiving and reflecting on practice feedback from someone who knows your practice and who is familiar with what competent practice looks like in your practice environment.

By default, you are expected to request this feedback from a current manager or supervisor. The CLPNM recognizes that some LPNs may not have a current manager or supervisor who is a regulated health care professional and able to provide feedback on their practice. Please refer to page 20 for information on circumstances in which you may request feedback from a colleague who knows your practice as an alternative. Throughout this section, any reference to employer feedback also applies to colleague feedback in cases where it is an acceptable alternative.

Your employer will provide this feedback using the CLPNM's Practice Feedback Form, which is [available on the CLPNM website](#). Advise your manager or supervisor that the form must be completed and submitted to the CLPNM by September 1, and that the CLPNM must receive the document in order for you to be able to renew your registration for the following year. After providing your employer with a copy of the form, be sure to follow up with your employer to confirm that the form has been completed and submitted to the CLPNM. It is your responsibility to ensure that the CLPNM receives the completed form by September 1.

Employers will be asked to provide feedback on your competence in a number of competency areas, using the following scale.

- **Competent (C):** Registrant has demonstrated consistent competence to the level required for safe and competent practice in this practice environment. Registrant may be competent, proficient and/or expert in this area of their practice.
- **Developing (D):** Competence in this area, relative to the expectations of the practice environment, is not yet fully demonstrated but the registrant is developing through feedback and support. The registrant may be a novice or advanced beginner or may require review/refresher/remediation.
- **Unsatisfactory (U):** Competency in this area, relative to the expectations of the practice environment, is not yet fully demonstrated and competency gaps are:
  - persistent despite feedback and support and/or
  - beyond those that can be addressed through the resources available in this practice environment.
- **Not Known (N):** Unable to assess the registrant's competence in this area.

Some LPNs may wonder what options are available to them if they feel that their employer's assessment of their competence was unfair. If this is the case, you must still arrange for your employer to submit their feedback to the CLPNM; however, you have the option to also submit to the CLPNM comments in response to your employer's feedback. If you disagree with your employer's feedback, be sure to indicate why and what you would propose instead as a focus for your QA

learning goal. The CLPNM will consider your comments and provide you with a response indicating whether the alternative learning goal will be accepted or not. Contact us at [practice@clpnm.ca](mailto:practice@clpnm.ca) to discuss how to submit comments in response to your employer's feedback.

In any case, if your employer has noted your competence as (U) or unsatisfactory in any area of competence, and you disagree, this points to an unresolved difference of opinion between you and your employer. You are encouraged to use conflict management and resolution skills to address this difference of opinion with your employer.

Please note that, regardless of the results of your practice feedback, the CLPNM may reach out to your employer to validate the information received. Any fraudulent practice feedback (e.g., tampering with the feedback in any way, or having an unauthorized person fill out the feedback form posing as your employer/colleague) may result in a referral to the CLPNM Investigation Committee or to the CLPNM Board of Directors.

## Choosing QA Learning Goals and Interventions

The CLPNM recognizes that many LPNs will receive positive feedback from their employers, with all competency areas noted as **Competent (C)**. If this is you, well done. You are likely a leader and role model in your profession and in your practice environment.

In this case:

- Your QA learning goal will not need to focus on remediating gaps/potential gaps in your competence.
- Choose a learning goal that will help you become even more prepared to prevent or manage potential risks associated with your practice that could result in harm to your clients. Consider, for example, risks related to the services you provide, your client population's unique needs, the equipment you use, the practice environment you work in, etc.

If your competence in one or more areas is noted as **Developing (D)**, your employer recognizes your current expertise, but has also noted that there is room for learning.

In this case:

- Consider how you could further expedite or add to your ongoing efforts to develop your competence in the areas that are developing.
- If more than one competency area is noted as developing, consider collaborating with your employer to choose a learning goal from amongst the competency areas noted as developing.
- Aim to identify the learning goal that will have the greatest impact on minimizing potential risks to your clients.
- Unlike learning goals chosen for Quality Improvement Learning Plans, you may choose a goal that relates to an entry-level competency, if your employer has noted that this is an area in which you need to refresh or remediate your knowledge, judgment and skill.
- If your competence is developing, the types of learning activities that are acceptable for QI Learning Plans are also acceptable for your QA Learning Plan. Your learning could take place

through a structured process (certificate program, course, workshop) that provides confirmation of participation and evaluation of learning, or could take place through more informal means, such as by reviewing journal articles, texts books or other nursing resources. Consult page 12 for information on acceptable learning activities.

If your competence in one or more areas is noted as **Unsatisfactory (U)**, this feedback points to a practice concern that requires remediation and which must, therefore, be the focus of your QA learning goal.

In this case:

- Remedial education will need to take place through a formal course or another structured process that provides you with an evaluation of your learning. You have a year to address this learning goal, so there is time for formal continuing education.
- You will be expected to provide documented evidence (e.g. a transcript, certificate of completion or signed documentation by a staff educator) confirming your participation in, and completion of, the course or program when you submit your completed learning plan.
- You could consider structured additional education provided by your employer or a staff educator. Additional education means a course, program of study, training or other structured process, whose purpose includes providing LPNs with greater depth and breadth of competence. There must be an assessment of the LPN by an experienced and authorized provider to confirm you have acquired the knowledge, skills, behaviours, attitudes, critical thinking and clinical judgment necessary to practice in the environment or to perform the specific nursing intervention being taught. Successful completion of the additional education provided by your employer or a staff educator, and the post-education assessment, must be documented.
- You are encouraged to consider the online courses available through post-secondary institutions such as Assiniboine Community College's Continuing Education Division, MacEwan University or NorQuest College.
- You may also find a course or program that fits your needs listed [on the CLPNM website](#) (Note that not all learning opportunities on this page would be suitable as not all provide evaluation of learning). If you are unable to find a course that addresses your learning needs, contact a CLPNM Practice Consultant at [practice@clpnm.ca](mailto:practice@clpnm.ca) for guidance.
- The CLPNM may check in with your employer(s) after you have completed your learning activities to confirm that the competency concern previously noted has been addressed or is improving.
- If your employer feedback notes competency concerns that are deeper and/or broader than those that could reasonably be addressed through a single learning goal, the CLPNM may need to address these concerns with you through an avenue outside of the CCP. Examples could include: directing an audit of your practice, directing that you meet with a CLPNM Practice Consultant, proposing a longer-term remedial education agreement, referring you for a clinical competence assessment, or in exceptional cases, referring the matter to the CLPNM's Investigation Committee for further investigation and monitoring.

Note that, if your employer selects **Not Known (N)** in one or more competency areas, the CLPNM will review the employer feedback overall and consider whether it suggests:

- You may not have chosen an appropriate employer to provide feedback.
- You are practising in a very isolated practice environment, which may in turn suggest that your competence may need to be confirmed by some other means (e.g. a practice audit involving direct observation, inspection, and/or chart audits).

If the CLPNM determines that either circumstance may exist, you will be contacted to discuss next steps.

Regardless of the practice feedback you receive, the following are **not** acceptable goals or learning activities for your QA Learning Plan.

- Goals that not client-centred, such as personal goals
- Goals that do not help to build your nursing competence (knowledge, judgment, skill)
- Training that is required as a basic condition of employment in most nursing practice environments, including but not limited to:
  - Cardiopulmonary Resuscitation / Basic Life Support
  - Workplace Hazardous Materials Information System
  - Lifts and Transfers
  - Personal Protective Equipment
  - Hand Hygiene
  - The Personal Health Information Act
  - Violence Prevention
  - Transfusion Best Practice
  - Respectful Workplace Policies

Please see the CCP Audit Categories section below (beginning on page 16) for more information on expectations and what to submit if you are selected for the Quality Improvement (QI) Audit (Category 1) or the Quality Assurance (QA) Audit (Category 2).

## Professional Portfolio

All LPNs in Manitoba maintain and regularly update their professional portfolio. The professional portfolio is an organized collection of documents that chronicle your nursing career and efforts to assess, maintain and build your professional competence. Maintaining your portfolio is a required component of the CCP. The CLPNM may ask any LPN for a copy to review it at any time. It may also be requested during the CCP Audit.

Your professional portfolio could take many forms. Some prefer to keep their material in a binder, others in a box, and others in a digital file. Whichever method you choose, ensure that your portfolio is organized and easily accessible for ongoing updates throughout the year.

Examples of documents to keep in a professional portfolio include:

- Self-assessments
- Learning plans
- A record of practice hours

- A completed Self-Employed Practice Reflection on Risk Form (RRF) if you are self-employed
- A current resume and references
- Copies of diplomas or certificates
- Records of attendance to courses, workshops, seminars, and learning materials obtained
- Performance appraisals
- Reports you wrote and presentations you have made
- Awards, letters of appreciation, and letters of recommendation
- Copies of articles read in journals, reliable online sources, textbooks, etc.

You must also keep in your portfolio completed CCP documents for at least the last four years, as well as the current year's documents in development.

## The CCP Audit

Every year as part of registration renewal, approximately 12% of Manitoba's LPNs are selected for a review of their CCP activities. This review is referred to as the CCP Audit.

If you are selected for the audit, you will be advised of that fact by mid-June each year by email.

Be sure that your email address, and all other contact information on file with the CLPNM, remains accurate and up-to-date so that you do not miss time-sensitive correspondence about the audit that could affect your registration.

It is also important that you regularly check your email, including your junk folder. You are also encouraged to add the clpnm.ca domain to your safe senders list in your email application. The CLPNM's primary means of corresponding with LPNs is by email, and notice is deemed to be given on the date that emails are sent to the email address on record with the CLPNM. Missing email correspondence from the CLPNM will not result in extensions or exemptions from the audit.

### Tip

Keep your email address up to date and check it regularly so you don't miss notices about the CCP Audit.

## The Audit and Your Renewal

If you are selected for the CCP Audit, submitting the required CCP information is part of your renewal application, and registration renewal deadlines apply.

These deadlines are:

October 22	For access to the lowest renewal fee.
October 31	Final deadline. No renewal applications (including the required CCP information for the CCP Audit) will be accepted after this date.

The CLPNM strongly recommends that you renew as early as possible, particularly if you have been selected for the CCP Audit. This allows enough time for you to troubleshoot any difficulties you may encounter completing and submitting your CCP information.

If you are wondering what, specifically, you must submit for the CCP Audit, first consider the following questions.

- Were you selected for the Quality Improvement Audit (Category 1) or the Quality Assurance Audit (Category 2)? Consult the applicable section below.
- Are you self-employed? If so, you need to submit the material required for the appropriate audit category (Category 1 or 2), plus additional documents related to your self-employed practice. Please refer to page 22, LPNs in Self-Employed Practice, for more information. You are also encouraged to review the Practice Direction on Self-Employed Practice, available [on the CLPNM website](#).
- Were you selected for verification of your practice hours? If so, you must also arrange for your employer to submit documentation verifying your hours. Please refer to page 30.

Your registration renewal application will not be processed until all the required CCP information is received. Late submissions may result in late fees (between October 23 – 31) or being ineligible to renew (beyond October 31). If you are not eligible to renew your registration, you must apply to reinstate your registration before practising again. Information on the reinstatement process is [available here](#).

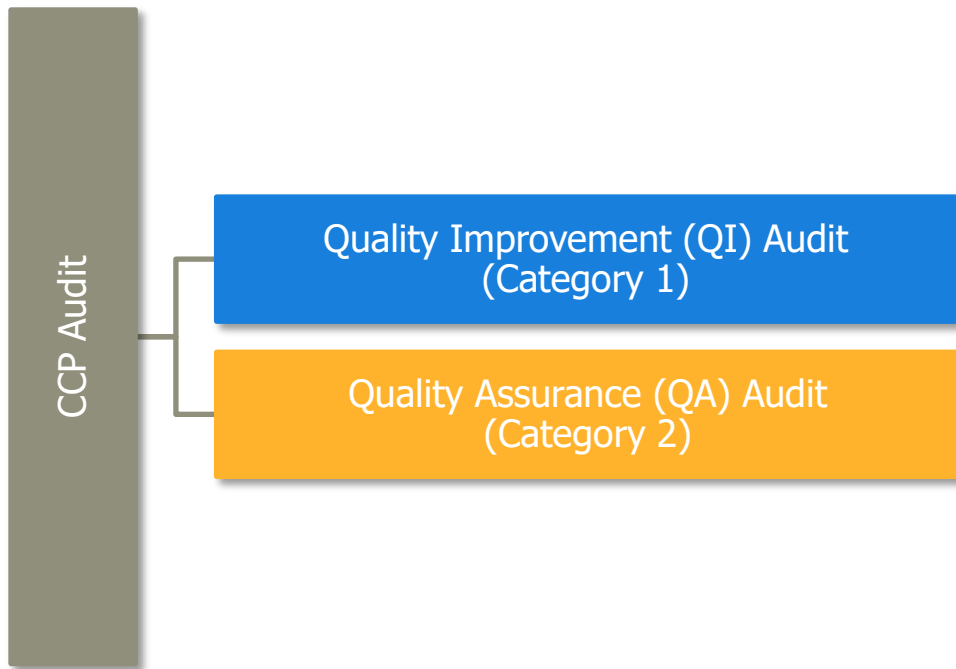
If you have questions about registration renewal or about how to login to your online registration profile, please visit the [Annual Renewal for LPNs](#) page of the CLPNM website.

## CCP Audit Categories

LPNs who are selected for the CCP Audit will be chosen for one of two categories:

- The Quality Improvement (QI) Audit (Category 1), or
- The Quality Assurance (QA) Audit (Category 2)

These two different audit categories have different requirements, so it is important to pay attention to which one you have been selected to participate in.



## The Quality Improvement (QI) Audit (Category 1)

Each year, a minimum of 10% of Manitoba’s LPNs will be selected for the Quality Improvement (QI) Category of the CCP Audit, also referred to as Category 1 of the audit.

The purpose of the QI Audit is to confirm that LPNs are building their competence and improving the quality of their care over the course of their careers. LPNs selected for the QI Audit are required to submit their completed QI Learning Plan during the registration renewal period. Their renewal application will not be processed unless a completed learning plan has been submitted.

Learning plans must be submitted through your online registration profile. Please see page 24 for more information on how to submit.

Once you have submitted your learning plan during the registration renewal period, it will be considered part of your renewal application and will be locked to further revisions until the CCP Audit begins in the winter.

If you are selected for the QI Audit (Category 1), you must submit one (1) learning plan, during the registration renewal period, from within your online registration profile.

Note that, although you are required to submit your QI Learning Plan during the renewal window, it will not be reviewed by CCP auditors until the CCP Audit takes place in January to March of the following year. Your audit results will not be available until that time.

## Tip

Make sure your learning plan shows the learning you completed in the correct year.

When completing your learning plan, remember that you will need to demonstrate that the learning activities described in your learning plan were completed during the past registration year. For example, if you are renewing your registration in the fall of 2023 for the 2024 registration year, and you were selected for the 2023 CCP Audit, you will be required to submit a learning plan that identifies learning activities you completed during the 2023 registration year.

LPNs selected for the QI Audit who are self-employed must also submit the documentation described under LPNs in Self-Employed Practice on page 22.

The deadline for submitting your completed QI Learning Plan (and documentation from your self-employed practice, if applicable) is the same as the deadline for registration renewal. See page 26 for dates.

During the CCP Audit, QI Learning Plans will be assessed by other active practising LPNs (referred to as CCP Auditors) to identify whether LPNs' learning activities contribute to their competence, are relevant to their practice, and are in keeping with other requirements of the program.

The QI Audit takes place from January to March each year. Specific dates of each audit phase will be posted on the CLPNM website, along with the expected dates for audit results.

During the QI Audit period, LPNs will have at least one opportunity to revise their QI Learning Plan if, following an initial review, the plan is found to not meet the requirements of the program.

## The Quality Assurance (QA) Audit (Category 2)

The objective of the Quality Assurance (QA) Audit, also referred to as Category 2 of the audit, is to obtain assurance that LPNs are demonstrating the competence necessary to practise safely in their current practice environment, particularly when the LPN practises in a context that is associated with higher risk for clients.

Each year, approximately 1-2% of LPNs will be selected for the QA Audit (Category 2). The selection process for this category of the audit will be weighted towards LPNs who practise in circumstances associated with higher potential risk. The risk factors to be applied in this weighting process will be identified based on data gathered from literature and the CLPNM's experience. Examples of risk factors include, but are not limited to: self-employed practice, agency practice, clinical practice in isolation from a team, and being new to CLPNM registration. Some LPNs will also be added to the QA Audit by random selection.

Those selected for the QA Audit also participate in the QI Audit, and therefore, must complete all steps required for the QI Audit noted in previous pages. Those selected for QA Audit have additional requirements, which include:

- obtaining feedback on their practice from a person who meets the criteria outlined on page 20 (in most cases this feedback must come from a current employer), and
- developing and completing a second learning plan.

The QA Audit will span three registration years. This does not mean that the LPNs selected for this category of the audit will need to actively work on their learning activities continuously for a full three-year period. The audit timeframes have been spaced out to provide LPNs adequate time for meaningful practice feedback, reflection, and learning activities. This timeframe also provides LPNs the opportunity to participate in courses or workshops, to meet their learning requirements, that might be offered only once a year.

## Year 1

If you are selected for the QA Audit (Category 2), you will be advised by mid-June in the first year. Complete each of the following steps in the year that you are selected for the audit.

- Choose an individual to consult for feedback on your practice. See page 20 below for criteria that will help you select an appropriate individual.
- Ask the person providing practice feedback to complete the CLPNM QA Audit Practice Feedback Form [available on the CLPNM website](#).
- Advise the person providing feedback that the form must be completed and submitted to the CLPNM by September 1 in the year you are selected for the QA Audit.
  - Ensure the person understands that the feedback form is part of your continuing competence requirements and is necessary in order for you to renew your registration.
  - If the person you have asked to provide feedback is still hesitant, please encourage them to reach out to the CLPNM Practice Department to discuss any questions or concerns they may have. The Practice Department can be reached at [practice@clpnm.ca](mailto:practice@clpnm.ca)
  - It is your responsibility to ensure that the CLPNM receives a completed Practice Feedback Form, from a person who meets the criteria outlined on page 20, by September 1.
- Review and reflect on the practice feedback.
- Choose and document a learning goal and plan learning interventions based on the feedback you've received. Consult page 12 to help you select an appropriate goal and learning interventions.
- Once registration renewal opens on September 1, you will document your learning goal and planned interventions in the "My Audit" section of your online registration profile. You must document your QA learning goal and planned interventions by the registration renewal deadline. Renewal dates are outlined on page 26.

- Feedback on your goal from the CLPNM will be provided to you before the end of the following January, so that the CLPNM's feedback will be available to you before you begin engaging in your planned learning activities. If your planned learning activities do not match the guidance provided in the section of this document titled Choosing QA Learning Goals and Interventions (page 12) you will be asked to select a more appropriate learning activity.
- Also be sure to:
  - Submit your completed QI Learning Plan and participate in the QI Audit (see pages 5 and 17).
  - Submit all documents required of self-employed LPNs, if you are also self-employed (see page 22).

## Year 2

In Year 2 you will:

- Receive feedback from the CLPNM on your QA learning goal (by end of January). Some registrants may be directed to revise their learning goal.
- Engage in learning activities to achieve the QA learning goal you identified the previous year (or a revised goal, if directed by the CLPNM).
- Submit to the CLPNM a completed QA Learning Plan, which documents:
  - the learning activities you completed after reviewing and reflecting on your practice feedback,
  - an evaluation of the impact of learning on your nursing practice, and
  - an assessment of the learning.
- The completed QA Learning Plan must be submitted to the CLPNM, before the registration renewal deadline in Year 2 (see page 26 for dates).
- You will document your completed learning in your QA Learning Plan by logging into your online CLPNM registration profile, navigating to the "My Audit" section on your dashboard, and opening the applicable audit. Note that "My Audit" may not appear on your dashboard until the registration renewal window opens on September 1.

## Year 3

In the third year (January – March), your completed QA Learning Plan will be reviewed. See information on the QA Audit Process below on page 28. A full summary of CCP Audit timelines, for both the QI and QA categories of the audit, are included in Appendix A.

## Selecting an Individual to Provide Practice Feedback

By default, LPNs selected for the QA Audit are required to obtain documented feedback on their practice from an employer.

The manager or supervisor you select to provide you with feedback on your practice for the purpose of the QA Audit must:

- be a current manager or supervisor
- be a regulated healthcare professional, but need not be a nurse.

### What if I do not have an employer?

If you do not have a manager or supervisor who fits the criteria listed above, you may ask for feedback from a colleague instead.

Circumstances in which you may request practice feedback from a colleague, instead of a manager or supervisor, include:

- you are self-employed, and work in collaboration with other regulated healthcare professionals
- your only manager or supervisor is not a regulated healthcare professional but you work in collaboration with other regulated healthcare professionals, or
- you practise only/primarily through a nursing agency, and your supervisor at the agency is not as familiar with your practice as a manager/supervisor in a health care setting where you have recently and frequently practised. In this case, it is appropriate to ask a manager or supervisor at a facility where you practise, even if they are not officially your employer.

You may wonder who you should ask to provide feedback if you do have a manager or supervisor who is a regulated healthcare professional, but you feel that they do not know your practice well. For example, maybe you have a very new manager who has known you only for a few weeks. In this case, feedback from your manager/supervisor will still be required, but you have the choice to also request feedback from a colleague. Obtaining feedback from a second source is your choice, and must be submitted to the CLPNM by the same deadline as the feedback from your employer (September 1).

When it is acceptable to ask for feedback from a colleague, instead of or in addition to a manager or supervisor, be sure to select a colleague:

- with whom you have a current professional relationship and who knows your nursing practice firsthand (e.g. current coworker, mentor, collaborator, or consultant)
- who understands what competent nursing practice looks like in the applicable environment or unit
- who is a regulated health care professional (LPN or other) themselves.

The CLPNM will not accept feedback from individuals who do not currently work in collaboration with the LPN in some capacity.

### What if I have more than one nursing position?

If you practise for more than one employer, select a manager or supervisor from the practice environment that is associated with the most risk to clients. Your QA Learning Plan will help you ensure you have the competence necessary to respond to and mitigate the risks you might face in that practice environment.

When considering risk, think about:

- which environment requires the most specialized knowledge, judgment and skill
- which environment is associated with the most fragile/vulnerable clients
- the stability of the environment, and
- the availability of other team members for consultation and assistance when required within each environment.

### What if I have neither an employer nor a colleague who knows my practice?

If you are a self-employed LPN who has been selected for the QA Audit and you do not have a colleague who is a regulated healthcare professional who can provide meaningful feedback on your practice, you must submit your completed Self-Employed Practice Reflection on Risk Form (RRF) as an alternative to a Practice Feedback Form.

After reflecting on your answers to all of the questions on the RRF, you will develop a QA learning goal that must be focused on quality practice, risk management, and/or risk mitigation in your self-employed practice. The RRF must be submitted to the CLPNM Practice Department by email at [practice@clpnm.ca](mailto:practice@clpnm.ca) by September 1. More details on the RRF can be found below under the heading LPNs in Self-Employed Practice.

Note that, in circumstances where an LPN practises in such isolation from other regulated health care professionals that there is no other professional able to provide feedback on their practice, the CLPNM may also direct a chart audit or practice audit as an additional method of confirming competence in the LPN's practice.

## LPNs in Self-Employed Practice

Due to the increased risk associated with self-employed practice, the CLPNM expects that self-employed LPNs are always self-assessing and engaging in learning to maintain and build competence in their area of self-employed practice.

As mentioned in the Quality Improvement Learning Plans section, starting on page 5, all LPNs are required to complete at least one QI learning plan each year. If you are self-employed, but also work a second nursing job where you are an employee, you might choose to focus your one mandatory QI learning plan for the year on either your self-employed practice or your nursing practice as an employee. Your self-assessment will help you to determine where you have the most opportunity or need to develop your competence.

Please note that although the CLPNM expects LPNs to complete at least one QI Learning Plan each year, self-employed LPNs who also have another nursing job where they are an employee should consider completing more than one learning plan in any given year, especially if their self-assessment shows that learning needs and/or competence gaps are present in both their self-employed practice and their nursing practice as an employee.

Additionally, risk assessment, risk management and risk mitigation are significant aspects of building and operating a self-employed practice. The CLPNM Practice Direction on Self-Employed Practice requires LPNs who engage in self-employed practice to reflect on the unique risks associated with their practice as the basis for developing and implementing risk management and mitigation strategies.

The Self-Employed Practice Reflection on Risk Form (RRF), found [here](#), is a tool that has been developed to support the required risk analysis process. All self-employed LPNs in Manitoba must complete this tool and update it at least annually. The completed form must be saved by the LPN as part of their professional portfolio and may be requested by the CLPNM at any time, including during the CCP Audit. The completed tool may also be submitted by a self-employed LPN selected for the QA Audit, as an alternative to submitting a Practice Feedback Form from an employer or colleague.

Furthermore, LPNs who work in self-employed practice, and who are selected for either the QI Audit and/or the QA Audit, must submit their learning plans as discussed above, but must also submit the following documents by the registration renewal deadline:

- Policy Manual Excerpts and
- Nursing Care Documentation Templates.

Read on for more instructions.

## Policy Manual Excerpts

Self-employed LPNs must submit excerpts from the policy manual of their self-employed practice including, at minimum, all of the following:

- the table of contents
- one (1) policy that pertains to the specific area of nursing care he or she provides
- one (1) billing policy
- one (1) policy on documentation and record keeping, including storage, retention, and destruction of health records, and
- one (1) policy outlining infection control practices.

### Tips

- In the “My Audit” section of your online registration profile, there will be five (5) fields to upload policy manual excerpts.
- They may not all appear at once. After you have used one field, the next field will appear.
- If all your policies are saved as a single electronic file, you can upload the combined file using only one (1) upload field and you can leave the rest blank. It does not matter whether you use 1 or 5 upload fields, as long as all required documents are included.
- Uploaded documents must be in PDF or jpeg formats.

LPNs should review the policies guiding their practice at minimum every five years, or more frequently as necessary. This does not mean each policy will require revision every time it is reviewed, however regular reviews will help the LPN identify content that may have become out of date, and which may require revision to remain consistent with current best practice and guidance from the CLPNM (as applicable), such as the most recent versions of the Practice Direction on Self-Employed Practice and the Practice Direction on Nursing Footcare. Both practice directions are available [on the CLPNM website](#).

Self-employed LPNs should note that their professional standards include an obligation to access, evaluate, and use the best available evidence that includes research findings to inform decision making and to support safe, quality practice (Standard 26). Self-employed LPNs must demonstrate that they are meeting this standard through the policies that guide their self-employed practice.

All policy manual excerpts must show the date the policy was last reviewed. During the audit, policy manual excerpts will be reviewed for evidence of the date they were last reviewed, and that the registrant has kept their policies consistent with current best practices.

Login to your online registration profile and find the section on the home page called "My Audit."

This is where you must submit your information for the CCP Audit.

## Nursing Care Documentation Templates

Self-employed LPNs must also submit blank copies of tools or templates used by the self-employed practising LPN in the provision of nursing care, including at least one (1) of each of the following:

- a nursing care plan template
- an assessment/care flow template, and
- a nurse's notes template.

Be sure not to submit completed templates that include client information.

Note that, like your learning plans, your policy manual excerpts and nursing care documentation tools must be submitted for the CCP Audit through your online CLPNM registration profile.

Your option to upload these documents will appear when you indicate that you are self-employed within the "My Audit" section of your online profile.

For further information and guidance on self-employed practice, please see the CLPNM's Practice Direction: Self-Employed Practice available on the CLPNM website.

## How to Submit

If you have been selected for the CCP Audit (in either Category 1 or Category 2), you will submit your learning plan(s), as well as documentation about your self-employed practice (if applicable),

through your online CLPNM registration profile.

You must submit this information from within the section of your online registration profile called "My Audit." The "My Audit" section will appear on the home page of your online registration profile as soon as registration renewal opens on September 1.

Be sure to submit your CCP information from within the "My Audit" section as soon as possible after renewal opens. Since your CCP information forms part of your registration renewal requirements, you will be unable to submit your renewal application if your CCP information has not been submitted first.

If you practise in a self-employed capacity, make sure to upload policy manual excerpts and nursing care plan templates as well. You will see the upload fields once you indicate, from within the "My Audit" section, that you practise in a self-employed capacity.

Be sure not to submit any identifiable client information. For example, make sure that the nursing care documentation templates you submit are empty templates, not copies that include actual client information. All LPNs must comply with privacy legislation including *The Personal Health Information Act* when submitting information for the CCP Audit.

Anything you must submit yourself for the CCP Audit must be submitted through your online registration profile in the "My Audit" section. Any third parties who are required to submit documents on your behalf will submit them by a different means.

For example:

- If you were selected for the QA Audit (Category 2), any employer or colleague you asked to complete a Practice Feedback Form on your behalf will submit it directly to the CLPNM using the [practice@clpnm.ca](mailto:practice@clpnm.ca) email address. Instructions are included on the form.
- If you were selected to have your practice hours verified by your employer, your employer will also be required submit verification directly to the CLPNM. Instructions to provide to your employer were included in the correspondence you received notifying you of your selection.

If you chose to enter your QI Learning Plan in your online registration profile earlier in the year, using the "My Learning" tab, that information will be pulled into the "My Audit" section for you. You can then review and revise your learning plan from within "My Audit" before submitting. Note that you must still click on "submit" at the bottom of the page within "My Audit" even if you completed your learning plan(s) in "My Learning" earlier in the year.

Once you submit your CCP information from within "My Audit," two things will happen:



### Tip

For a summary of what to submit for the CCP Audit please see Appendix B.

- You will now also be able to complete and submit your registration renewal application.
- Your learning plan(s) will be locked to further editing until they are reviewed the following winter, after the CCP Audit begins. If you submitted in error and need assistance, please contact us.

You can find a list of the information and documents you must submit for the CCP Audit, depending on your audit category, in Appendix B: Summary of What to Submit for the CCP Audit.

## Important Dates

September 1	Annual registration renewal opens. If you are selected for the CCP Audit, you will see a "My Audit" section on the home page of your online registration profile. You can now submit your CCP information.
October 22	Your complete registration renewal application is due today. If you were selected for either the QI or QA Audit, submitting your CCP information is a registration renewal requirement and is due today if you wish to pay the lowest fee for renewal.
October 31	This is the last day to complete your renewal application. If you were selected for either the QI or QA Audit, this is the last day you are eligible to submit your CCP information and the rest of your renewal application. Your renewal will be subject to a late fee.

## What Happens During the Audit?

### The Quality Improvement (QI) Audit Process (Category 1)

Between January and March of each year, your CCP QI Audit material will be independently reviewed by a minimum of two auditors to ensure they comply with the program's requirements.

All CCP auditors are active practising LPNs who have been educated on audit guidelines and have signed confidentiality agreements. They will look to verify that your learning plan is complete, and for evidence that you've completed learning activities that contribute to your goal, add to your knowledge, and augment your practice as a nurse. The auditors may verify the references you've cited, and confirm your attendance at in-services, courses and workshops.

If the auditors find there is not enough information in your learning plan, they may ask you to submit additional documentation, as well as a copy of your self-assessment and/or your professional portfolio. The auditors and the CLPNM will work with you to ensure you receive the information and guidance you need throughout the audit process.

If the auditors find that your learning goal and/or learning interventions do not match the requirements of the program, as outlined above in this instruction guide, you may be asked to identify a new learning goal and/or to complete different learning interventions.

There will be at least two phases to the QI Audit, with each phase lasting approximately six weeks. This provides you at least two opportunities to demonstrate that your learning activities meet the requirements of the program. After each phase, you will be notified of your results by email.

If the auditors determine that you've met the requirements of the CCP during the first phase, you will not need to participate in the subsequent phase. If the auditors determine that revisions are needed, you will be required to participate in the next audit phase and the auditors' direction will be noted in your online registration profile. You will also receive an email from the CLPNM advising you that the auditors have provided you with follow-up instructions, and the associated deadlines.

If you will not have access to email for an extended period during the audit, you are responsible for contacting the CLPNM to verify your results. All LPNs selected for the audit are expected to meet audit deadlines, regardless of work or vacation schedules.

Meeting all deadlines and directions given by the CLPNM and the CCP auditors during the audit is necessary to maintain your registration in good standing. Refer to the section below titled *When a Registrant Does Not Meet CCP Requirements* (page 30) for information on the decisions the Executive Director of the CLPNM might make, following missed deadlines and directions.

The CCP is not meant to be a punitive process, nor is the audit. The CLPNM and auditors endeavor to support LPNs throughout the process, and the vast majority of LPNs are successful.

QI Audit Phases	Takes Place & Results Sent	Results and Next Steps	
		If Accepted	If Not Accepted
Phase 1	January	<ul style="list-style-type: none"> <li>You have successfully completed the QI Audit.</li> <li>You will be advised by email.</li> <li>No further action required.</li> </ul>	<ul style="list-style-type: none"> <li>You will participate in Phase 2.</li> <li>You will be advised by email; however, detailed instructions for revisions will be found in your online registration profile.</li> <li>You will be given a minimum of 6 weeks to revise your learning plan, which will offer you time to complete new learning activities if directed.</li> <li>Further direction will be provided.</li> <li>You are encouraged to contact the CLPNM Practice Department for guidance and support, if you do not understand the auditors' directions or the requirements of the CCP to help you be successful in Phase 2.</li> </ul>
Phase 2	February	<ul style="list-style-type: none"> <li>You have successfully completed the audit.</li> <li>You will be advised by email.</li> <li>No further action required.</li> </ul>	<ul style="list-style-type: none"> <li>Continuing competence has not yet been demonstrated.</li> <li>You will be advised by email. Directions about your next steps will be included.</li> <li>See more under "When a Registrant Does Not Meet CCP Requirements" below, starting on page 30.</li> </ul>

## The Quality Assurance (QA) Audit Process (Category 2)

As stated earlier in this guide, if you are selected for the QA Audit (Category 2), your requirements include also participating in the QI Audit. All information on the QI Audit process, timelines and directions apply to you as well. See pages 17 and 26.

Your Practice Feedback Form and QA Learning Plan will be reviewed by CLPNM Practice Consultants. You will receive feedback from the CLPNM on your proposed QA learning goal and planned learning interventions at the beginning of Year 2, in January.

Once your learning goal has been accepted by the CLPNM, you may move on to engaging in learning activities and completing your learning plan in Year 2 of the QA Audit. You will submit your completed QA Learning Plan in the fall of Year 2 during registration renewal, which will then be reviewed in January – March of Year 3.

You will receive feedback from the CLPNM on your completed QA Learning Plan. If your completed QA Audit submission is satisfactory, you will have successfully completed the CCP Audit. If your QA Audit submission is unsatisfactory, the CLPNM will review the matter and make further decisions.

QA Audit Steps	Takes Place & Feedback Sent	Results and Next Steps	
		If Accepted	If Not Accepted
CLPNM review of your practice feedback form, learning goal, and planned learning interventions	Review starts December (Year 1) Feedback by end of January (beginning of Year 2)	<ul style="list-style-type: none"> <li>You will be advised by email.</li> <li>Carry on to complete your planned learning interventions in Year 2.</li> </ul>	<ul style="list-style-type: none"> <li>Revise your goal and/or planned interventions based on CLPNM feedback.</li> <li>Complete any additional directions provided.</li> </ul>
	February to September 1 (Year 2)	<ul style="list-style-type: none"> <li>Complete your planned learning interventions in Year 2.</li> <li>Submit your completed QA Learning Plan during registration renewal (Fall of Year 2).</li> </ul>	
CLPNM review of your completed QA Learning Plan	January – March (Year 3)	<ul style="list-style-type: none"> <li>You have successfully completed the QA Audit.</li> <li>You will be advised by email.</li> <li>No further action required.</li> </ul>	<ul style="list-style-type: none"> <li>Continuing competence has not yet been demonstrated.</li> <li>You will be advised by email. Direction on your next steps will be included.</li> <li>See more under “When a Registrant Does Not Meet CCP Requirements” below.</li> </ul>

## Verification of Hours

Practising a minimum of one thousand (1000) nursing hours in the past four years is a requirement for registration renewal. Every year, out of the total number of registrants selected for the CCP Audit, 15% will also be randomly selected for a verification of their practice hours. Those who are selected must have all employers from the past four (4) years provide documentation verifying the LPN's practice hours directly to the CLPNM.

The CLPNM will advise the LPNs who are selected for this process by email, and at that time, will provide them with the form their employer(s) must complete. This form must be sent by employers directly to the CLPNM. Forms submitted to the CLPNM by LPNs themselves will not be accepted. The LPN is, however, responsible for ensuring that their employer(s) submit the form to the CLPNM before the stated deadline.

Self-employed practising registrants, who are required to complete the verification of hours process, will be required to complete a statutory declaration related to their self-employed practice hours. The CLPNM will provide guidance on this process, along with any other specific direction necessary, by email.

For more information on the CLPNM's requirements for LPNs in self-employed practice, please refer to the [CLPNM Practice Direction: Self-Employed Practice](#).

## When a Registrant Does Not Meet CCP Requirements

The CLPNM has an obligation, as a professional regulator, to oversee its registrants' continuing competence. Therefore, in a case where an LPN does not:

- engage in assessment of their practice and learning as required by the program
- complete the required learning activities (annual Quality Improvement Learning Plans, the Annual Professional Learning Module, and Quality Assurance Learning Plans when directed)
- keep or submit the required evidence of their learning activities
- demonstrate satisfactory learning and/or competence when audited
- meet deadlines and participate in processes to confirm their competence and CCP participation, and/or
- meet any other requirement of the CCP,

the CLPNM will review the matter and make further decisions.

Potential decisions include:

- directing a registrant to further revise and resubmit a learning plan for an additional review
- directing a registrant to meet with a CLPNM Practice Consultant for a focused review of their professional responsibilities related to continuing competence
- adding a registrant to the selection pool for the CCP Audit the following registration year, or in a subsequent registration year, in either the QI or QA category

- directing a more in-depth audit of the registrant’s practice (e.g., chart review, inspection and/or observation)
- directing the member to successfully complete any examinations, tests, assessments, training or education that the registrar considers necessary to establish that the LPN is competent to engage in the practice of practical nursing
- referring the matter to the CLPNM Investigation Committee as a potential breach of professional standards
- referring the matter to the CLPNM Board of Directors for a decision under section 14 of the LPN Act (or a similar provision in successor legislation), and/or
- any other decision authorized by governing legislation.

## For More Information

If you have read through this Instruction Guide and still have questions, you can access further information on CLPNM website at:

<https://www.clpnm.ca/for-registrants/continuing-competence/continuing-competence-program/>

and

<https://www.clpnm.ca/for-registrants/continuing-competence/continuing-competence-audit/>

You may also contact the CLPNM by email at [practice@clpnm.ca](mailto:practice@clpnm.ca) or by phone at 204-663-1212 or 1-877-663-1212 toll free.

# Appendix A: Summary of CCP Audit Timelines

	REGISTRATION YEAR 1				REGISTRATION YEAR 2				REGISTRATION YEAR 3	
	Mid June	Jun-Aug	Renewal Period Sep 1 - Oct 31	Nov - Dec	Jan	Feb - Mar	Apr- Aug	Renewal Period Sep 1 - Oct 31	Jan	Feb - Mar
<b>QI AUDIT (Category 1)</b>	You will be advised if you are selected for the QI Audit.	Complete your QI Learning Plan (if not already complete).	Submit your completed QI Learning Plan at the same time as your renewal application.  (Submit in "My Audit" in your online profile).  If self-employed, submit policy manual excerpts and nursing care plan templates.		Phase 1 of the audit takes place.  The CLPNM will send you your results and direction on next steps (if any).	Revise your learning plan (if directed by CCP Auditors)  Phase 2 of the audit takes place.  The CLPNM will send you your results and direction on next steps (if any).				
<b>QA AUDIT (Category 2)</b>	You will be advised if you are selected for the QA Audit.	Complete your QI Learning Plan (if not already complete).	Submit your completed QI Learning Plan at the same time as your renewal application.  If self-employed, submit policy manual excerpts and nursing care plan templates.		Phase 1 of the audit takes place.  The CLPNM will send you your results and direction on next steps (if any).	Revise (if directed by CCP Auditors)  Phase 2 of the audit takes place.  The CLPNM will send you your results and direction on next steps (if any).				
		Ask your employer/colleague to complete the CLPNM Practice Feedback Form	Have employer/colleague submit the Practice Feedback Form to the CLPNM and to you (by Sep 1).  Submit your QA learning goal and planned learning interventions, at the same time as your renewal application. (Submit in "My Audit" in your online profile).		The CLPNM will provide feedback on your goal and planned activities.	Complete the planned learning activities.  →		Submit information about your completed learning activities at the same time as your renewal application.	Phase 1 of the audit takes place.  The CLPNM will send you your results and direction on next steps (if any).	Revise your learning plan (if directed by the CLPNM)  Phase 2 of the audit takes place.  The CLPNM will send you your results and direction on next steps (if any).



## Appendix B: Summary of What to Submit for the CCP Audit

	Submit Quality Improvement Learning Plan	Arrange for Employer/Colleague to Submit Practice Feedback Form*	Submit Quality Assurance Learning Plan	Submit Self-Employed Practice Documents	Arrange for Employer to Submit Verification of Hours
Selected for the QI Audit (Category 1)	Yes				
Selected for the QA Audit (Category 2)	Yes	Yes	Yes		
Selected for the QI Audit + You Are Self-Employed	Yes			Yes	
Selected for the QA Audit + You Are Self-Employed	Yes	Yes	Yes	Yes	
Selected for the QI Audit + Verification of Hours	Yes				Yes
Selected for the QA Audit + Verification of Hours	Yes	Yes	Yes		Yes
Selected for the QI Audit + Verification of Hours + You Are Self-Employed	Yes			Yes	Yes
Selected for the QA Audit + Verification of Hours + You Are Self-Employed	Yes	Yes	Yes	Yes	Yes

\*Or the Self-Employed Practice Reflection on Risk Form as an alternative, if applicable.