

	FITNESS TO PRACTICE POLICY
	Date Effective: April 27, 2020
	Revised: Next Review Due: April 2023

Background

Fitness to Practice is a measure of health and wellness as it relates to work, in this case as an RN or NP. This policy allows a non-disciplinary approach to registrants who self-identify as having fitness to practice issues. Nurses who have a medical, physical, or mental health condition that has resulted in an inability to practice safely can seek treatment options and complete remediation activities without entering the discipline process. The goal is for the nurse to return to practice once they are able to provide safe nursing care.

The Act in Section 57(2) includes incapacity as a reason why an RN or NP may be unable to practice nursing. Fitness to Practice is considered one of the types of incapacity.

Purpose

The purpose of this policy is to define a process when a registrant self-reports a fitness to practice issue or a fitness to practice issue is identified by an employer or other person.

1.0 Policy

- 1.1 Fitness to practice issue resolution may be used as an alternative to the discipline process.
- 1.2 The informal resolution in this case focuses on remediation, where the results of the process will be shared only to the extent required to protect the public interest.
- 1.3 In the event that the Registrar must do some inquiry to determine the extent of the issue, the Registrar shall recognize the sensitivity of the information being discussed and shall only disclose to any person being interviewed such information as is considered necessary for the purposes of the inquiry.

- 1.4 The Registrar may receive a report of concerns about fitness to practice verbally or in writing from any person about a registrant or from the registrant themselves, referred to as *the informant*.
- 1.5 Every registrant has a duty to report behavior they believe may create incapacity as per the RHPA Section 62(1)(a) and (b).

Non-Self Report

- 1.6 In the case of a report of Fitness to Practice issues in the form of a complaint, the Registrar follows the usual complaint process as per RHPA.
- 1.7 In the absence of a complaint, the informant may disclose to CRNPEI that a registrant may have fitness to practice issues.
- 1.8 The Registrar shall review the identified concerns including details about the circumstances with the informant.
- 1.9 If the Registrar determines that the description of the circumstances do not constitute a fitness to practice issue in their opinion, the Registrar shall explain their reasoning to the informant and notify them of their ability to submit a complaint.
- 1.10 If no complaint is filed, no further action shall be taken, and the informant, the person implicated and such other persons determined by the Registrar shall be notified of this outcome.
- 1.11 If a complaint is filed, the matter shall be processed as in other complaints, in accordance with the RHPA.
- 1.12 If the Registrar is of the opinion that a fitness to practice issue may exist, the Registrar shall inquire to understand the issue fully and shall consider submitting a complaint as per RHPA or meeting with the registrant and the employer (if appropriate) to determine if an informal process of resolution is possible.

Self Report

- 1.13 In the event that a registrant self-reports a Fitness to Practice issue to CRNPEI, the Registrar shall seek details about the concern including specific circumstances of the registrants' work responsibilities.
- 1.14 If an informal process may provide a safe resolution for all parties involved, the Registrar will follow up to assess the details of the Fitness to Practice issue.

- 1.15 If the Registrar does not believe that an informal process will be appropriate, they shall refer the issue to an investigation committee as a complaint.
- 1.16 The registrant will be required to meet with the Registrar, either in person or by telephone, as determined by the Registrar, to thoroughly review the details of their Fitness to Practice issue and the circumstances surrounding it.
- 1.17 If the registrants' circumstances are indicative to the Registrar of an imminent safety risk to the registrant or their clients, the registrant will be required to leave the workplace immediately if they are in the workplace or take leave if they are not in the workplace. In either case the employer is notified by the registrant and follow up with the employer by the Registrar is also done.
- 1.18 The Registrar will consider the information received from the registrant and determine next steps which may include a further meeting with the Registrar or with the Registrar and the employer.
- 1.19 The meeting described in 1.16 will result in a plan for:
 - 1.18.1 the registrant to manage their current situation,
 - 1.18.2 immediate intervention if required,
 - 1.18.3 ongoing monitoring, and
 - 1.18.4 a return to work plan, if not able to continue working, or
 - 1.18.5 a "safe" work plan, if continuing to work.
- 1.20 The registrant will be required to keep in regular communication with the Registrar which will be determined as part of the plan described in 1.19.
- 1.21 Before the registrant returns to work, the registrant will be required to meet with the Registrar and/or the employer, even if the employer was not involved in the original meeting described in 1.15.
- 1.22 If there is no safety risk identified to the registrant or clients, the registrant may continue in the workplace perhaps with modified duties, if deemed appropriate by the Registrar and the employer, and supported by the employer.
- 1.23 In the case where a registrant continues work, the Registrar, the registrant and the employer would all participate in a meeting to formulate a plan to identify roles and responsibilities in relation to the registrant's presence in the workplace.
- 1.24 The Registrar may invite other key people to inform the plan described in 1.19.

- 1.25 The plan described in 1.19 results in a written agreement between the Registrar and the registrant.
- 1.26 The written agreement, referred to as a “Fitness to Practice Agreement” will be prepared by the Registrar and signed by the registrant and the Registrar. The registrant must voluntarily sign the agreement and the registrant’s signature is witnessed.
- 1.27 The agreement must address the following areas:
 - 1.27.1 the voluntary and non-disciplinary nature of the informal resolution;
 - 1.27.2 the informal resolution record is not public or available to the CRNPEI Council members, or other regulatory bodies in Canada;
 - 1.27.3 the dates of the nurse’s participation and the expected length of participation;
 - 1.27.4 the requirements for physician/NP assessment and follow-up, substance-use screening, 12-step programs, formal support, therapeutic meeting attendance, and self and supervisory reports, if applicable;
 - 1.27.5 the requirements of work-site monitoring upon return to work or continuing at work;
 - 1.27.6 in the event of relapse, the reporting expected by the registrant
 - 1.27.7 in the event of failure to meet the requirements of the agreement, the expected reporting by the registrant and response by the Registrar;
 - 1.27.8 the parameters for referral to the Council of CRNPEI;
 - 1.27.9 definitions of relevant terms such as relapse;
 - 1.27.10 appropriate releases for CRNPEI to receive results and reports;
 - 1.27.11 requirements at the time of return to work (if applicable) including specifics about involvement of the employer;
 - 1.27.12 the period of monitoring.

- 1.28 When a registrant seeks to return to practice after completing the terms and conditions of an agreement as described in 1.27, the Registrar shall review the information provided by the registrant to determine if the registrant is ready for return to work.
- 1.29 The Registrar will request a meeting with the registrant and employer to determine next steps for return to work, if applicable.
- 1.30 For a registrant returning to work, following the meeting with the employer, the Registrar will determine whether the registrant needs to stay in contact CRNPEI.