

Comprehensive Report on PSA Recommendations

In response to the PSA recommendations, the SRNA has undertaken a thorough review of the complaints and investigations functions. All the recommendations made by the PSA have been addressed. Further, with a view to continuous quality improvement (CQI), ongoing work has been incorporated into the SRNA's 2021-2023 strategic plan. A summary of what has been done includes, but is not limited to the following:

Standard 1 - Anybody can raise a concern, including the regulator about a member

Recommendations:

5.7 We recommend that the SRNA provide information on the SRNA's website about support that would be offered for anyone facing difficulty in completing a written letter of complaint.

5.8 We recommend that, as part of the triage process steps are included to identify cases where complainants may require assistance to produce a written complaint.

5.9 We recommend that the SRNA develop a clear policy or procedure to allow the SRNA or Investigation Committee to report an 'own motion' complaint or authorise an investigation.

5.10 We recommend that the SRNA develop a clear policy or procedure to address additional conduct or competence matters that come to the SRNA's attention during an investigation.

Actions:

1. The Investigation Committee procedure manual has been reviewed & revised
2. Verbiage/information on the SRNA website has been updated
3. The triage process has been reviewed & revised
4. Process to review active cases has been implemented

Standard 2 - Information about complaints is shared with other organizations within the relevant legal frameworks

Recommendations:

5.11 We recommend that the SRNA develop a process for considering information obtained from the competence assurance process survey and developing and implementing improvements to the process.

5.31 We recommend that the SRNA share the analysis of complaints data with bodies with similar interests.

5.32 We recommend that the SRNA exchange information with other bodies with a relevant interest where complaints cases indicate information that may be of interest to them in relation to public protection or the wider public interest.

Actions:

1. A CQI process has been developed which involves gathering feedback from complainants and respondents; analyzing allegations for trends and themes; and engaging with provincial and national regulatory bodies
2. Collaborate with Practice to provide upstream resources/education
3. Ongoing work has been incorporated into the SRNA strategic plan

Standard 3 – The regulator will investigate a complaint, determine if there is a case to answer & take appropriate action including imposition of sanctions. Where necessary, the regulator will direct the person to other relevant organizations

Recommendations:

5.12 We recommend that the SRNA provide detailed guidance for the Investigation Committee on the questions to be answered in each case at each stage of the decision-making process such as evidential sufficiency, whether the facts amount to misconduct and/or incompetence, whether there is evidence of undesirable practice and whether the case is appropriate for CCRA. (Standards 3, 5 and 8)

5.13 We recommend that the SRNA develop sanctions guidance setting out the factors that will be taken into account when determining the appropriate outcome in an individual case.

5.14 We recommend that the SRNA develop published criteria setting out those matters that would not meet the SRNA's threshold for establishing professional misconduct and/or professional incompetence.

5.33 We recommend that the SRNA develop a system of quality control that enables it to identify inconsistency in the decisions that are taken or the investigation steps that are followed and details of how learning from this is used to improve the investigation process.

5.34 We recommend that the SRNA develop an induction procedure for new staff and policies dealing with the allocation and handover of files between investigators.

Actions:

1. The Investigation Committee procedure manual has been reviewed & revised
2. Verbiage/information on the SRNA website has been updated
3. A Decision-Making Framework has been developed
4. The triage & case assignment processes have been reviewed & revised
5. An orientation manual for new investigators has been developed
6. Plan for ongoing professional development for Investigation Committee members
7. Ongoing work has been incorporated into the SRNA strategic plan

Standard 4 – All complaints are reviewed on receipt & serious cases are prioritized

Recommendations:

5.15 We recommend that the SRNA review the current triage process and develops this further to include preliminary investigations, safety risk analyses and prioritisation and establishes processes to support staff in prioritising cases.

5.16 We recommend that the SRNA introduce guidance for staff with tools for consistently: identifying agreed areas of risk; making reasoned decisions about prioritisation of cases; and recording the reasons for decisions about the progression of cases and for taking/not taking action.

5.17 We recommend that the SRNA introduce timeframes and guidance for the ongoing risk assessment of cases as new information arises and at relevant and appropriate stages of the case to demonstrate that appropriate action has been taken once risks have been identified.

Actions:

1. The Investigation Committee procedure manual has been reviewed & revised
2. The triage & case assignment processes have been reviewed & revised
3. Process to review active cases has been implemented
4. Ongoing work has been incorporated into the SRNA strategic plan

Standard 5 – The complaints process is transparent, fair, proportionate, & focused on public protection

Recommendations:

5.13 We recommend that the SRNA provide detailed guidance for the Investigation Committee on the questions to be answered in each case at each stage of the decision-making process such as evidential sufficiency, whether the facts amount to misconduct and/or incompetence, whether there is evidence of undesirable practice and whether the case is appropriate for CCRA. (Standards 3, 5 and 8)

5.18 We recommend that the SRNA provide guidance to the Investigation Committee, members and the public as to those matters that will not ordinarily amount to professional misconduct or professional incompetence and those matters that might constitute undesirable practice.

5.19 We recommend that the SRNA review the competence assurance procedure to ensure complainants are not treated differently from members without justification.

5.20 We recommend that the SRNA review the process for submitting investigations to be considered by the Investigation Committee to increase transparency and avoid any perception of bias.

5.21 We recommend that the SRNA consider whether it could introduce a process for internal review of decisions not to refer a case to the Discipline Committee

Actions:

1. Plan for ongoing professional development for Investigation Committee members
2. A Decision-Making Framework has been developed
3. The Investigation Committee procedure manual has been reviewed & revised
4. The triage & case assignment processes have been reviewed & revised
5. Process to review active cases has been implemented

6. Verbiage/information on the SRNA website has been updated
7. Ongoing work has been incorporated into the SRNA strategic plan

Standard 6 – Complaints are dealt with as quickly as possible, taking into account the complexity & type of cases & conduct of both sides. Delays do not result in harm or potential harm to clients

Recommendations:

5.35 We recommend that the SRNA conduct a review of the resources in the complaints and investigation function to determine what additional resources may be required to expedite the handling of cases and to eliminate the backlog of cases that has been accrued without any consequential negative impact on the newer cases that are being received.

5.36 We recommend that the SRNA introduce a regular reporting mechanism to Registrar and senior management that includes an analysis of the length of time taken to progress cases through each stage of its complaints process to ensure cases are progressed as quickly as possible and that improvements are maintained.

5.37 We recommend that the SRNA undertake work to map the pathway of a complaint from receipt to closure.

Actions:

1. Additional human resources have been allocated to the investigation team
2. A reporting mechanism internal to the SRNA & Council has been implemented
3. Ongoing work has been incorporated into the SRNA strategic plan

Standard 7 – All parties to a complaint are kept updated on the progress of their case & supported to participate effectively in the process

Recommendations:

5.22 We recommend that the SRNA develop guidance on the timeframes within which members and complainants are updated in individual cases.

5.38 We recommend that the SRNA develop guidance on the timeframes within which members and complainants are updated in individual cases together with a system for monitoring the steps taken by investigators or administrators to keep parties updated.

Actions:

1. The Investigation Committee procedure manual has been reviewed & revised
2. A communication plan has been implemented to provide timely & regular updates throughout the investigation process
3. The complaints & investigation database has been revised

Standard 8 – All decisions at every stage of the process are well reasoned, consistent, protect the public & maintain confidence in the profession

Recommendations:

5.12 We recommend that the SRNA provide detailed guidance for the Investigation Committee on the questions to be answered in each case at each stage of the decision-making process such as evidential sufficiency, whether the facts amount to misconduct and/or incompetence, whether there is evidence of undesirable practice and whether the case is appropriate for CCRA. (Standards 3, 5 and 8)

5.23 We recommend that the SRNA develop guidance as to what may constitute undesirable practice warranting a letter of guidance where a complaint is not substantiated.

5.24 We recommend that the SRNA revise its guidance on cases where a CCRA may be considered appropriate and specify circumstances where it will be necessary to refer a case to the Discipline Committee for determination.

5.25 We recommend that the SRNA develop guidance and provide education/training for the Investigation Committee to support decision-making around the issuing of letters of guidance or agreeing CCRAs. In particular, the guidance should assist the Investigation Committee to give reasons explaining how the outcome addresses public protection, confidence and professional standards.

Actions:

1. The Investigation Committee procedure manual has been reviewed & revised

2. A Decision-Making Framework has been developed
3. Plan for ongoing professional development for Investigation Committee members
4. Ongoing work has been incorporated into the SRNA strategic plan

Standard 9 – All final decisions, apart from matters relating to the health of a nurse, are published in accordance with the legislation & communicated to relevant stakeholders

Recommendations:

5.26 We recommend that the SRNA develop a policy setting out the SRNA's positions on what sanctions will and will not be published, what information will and will not be anonymised, and the timescales for publication.

Actions:

1. The SRNA administrative policies have been reviewed & revised
2. The Investigation Committee procedure manual has been reviewed & revised

Standard 10 – Information about complaints is securely retained

Recommendations:

5.27 We recommend that the SRNA develop procedures for staff under its policy on confidentiality of investigation files to link with other information security policies and ensure action is taken when breaches occur to prevent recurrence.

5.28 We recommend the SRNA address the secure retention of postal communications on receipt and general security of those areas where investigations information is held within the SRNA's offices.

5.29 We recommend that consideration be given to rationalising investigation files and the way they are accessed by staff and the Investigation Committee.

Actions:

1. The SRNA administrative policies have been reviewed & revised
2. The Investigation Committee procedure manual has been reviewed & revised
3. An orientation manual for new investigators has been developed

4. Ongoing work has been incorporated into the SRNA strategic plan