



College of
Registered Nurses
of Manitoba

Continuing Competency Program Workbook for RNs and RN(NP)s

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Remember, you only need to complete the CCP review if you are selected

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For the purpose of this document, the term RN also refers to RN(NP).

Program Overview

The *Regulated Health Professions Act (RHPA)* sets out our responsibilities. Under this legislation, we are required to have a continuing competency program (CCP) for registered nurses that promotes high standards of knowledge, skill and ethical practice.

RNs are required to complete the CCP every year. The program is an opportunity for you to reflect on your nursing practice and lead your own learning. Throughout the year, our CCP team is here to support you during the process.

The program is a supportive program; it promotes and supports opportunities for learning and development.

What does the College already believe and assume?

- All RNs are committed to obtaining the knowledge, skill and judgment they need in order to provide safe, competent and ethical care.
- Self-reflection improves empathy, listening, critical thinking and decision-making skills. It also allows RNs to improve their communication with others and enhances their leadership qualities.
- RNs maintain and enhance their competence through self-reflection, lifelong learning and integrating that learning into their practice.
- RNs who take time to reflect on their practice provide quality nursing care.
- Manitobans expect RNs to be current and competent in their practice.
- Our *Practice Expectations for RNs* provide a foundation for the program and describe reasonable and prudent nursing practice.

We keep all information about an RN's continuing competency confidential. You can choose to share this information with your employer(s) if you wish. While the program is a requirement under legislation, it's also intended to support you in your professional development and commitment to lifelong learning.

What are the goals of the program?

The CCP has three goals:

1. **Encourage self-reflection:** RNs are able to assess their nursing practice by completing a self- assessment, as well as receive feedback on their practice from peers and clients. Through self-reflection, RNs will develop skills in self-directed learning, increase their motivation to learn and improve the quality of care they provide.
2. **Enrich practice:** RNs have the opportunity to learn something new that they can use in their practice.
3. **Address learning needs:** RNs demonstrate a commitment to lifelong learning by taking action on what they discover about their practice (i.e. through self-reflection, feedback from others and goal setting).

*The program **does**:*

- involve a team at the College who is committed to supporting RNs as they complete the program
- encourage RNs to reflect on their practice in relation to the practice expectations
- provide RNs with a framework to integrate self-directed learning into their practice
- provide RNs with the opportunity to obtain feedback about their practice from their colleagues and clients
- provide RNs with resources to maintain and enhance their practice in relation to the practice expectations
- ensure RNs are aware of relevant jurisprudence (i.e. legislation, regulations, standards, policies) that affects their practice

*The program **does not**:*

- assess an RN's fitness to practise
- assess if an RN is meeting the requirements of their current or former employment

Annual Requirements

Let's look at what RNs must complete as part of the program.

Each year, you document your ongoing learning in our [CCP forms](#), which have four parts:

1. **Part A: Self-assessment:** assess nursing practice through a questionnaire
2. **Part B: Learning plan:** set self-directed learning goals, decide on learning activities and explain how they impact nursing practice
3. **Part C: Jurisprudence learning module:** complete the module and record any key learning concepts
4. **Part D: Learning activities (optional):** keep track of any extra learning activities completed beyond the learning plan

To practice in the upcoming year, you need to renew your certificate of practice by Dec. 1. As part of this process, you need to complete parts A, B of these forms and the mandatory annual jurisprudence module. We'll dive into these components over the next few pages.

Part A: Self-Assessment

What is the purpose of a self-assessment?

The self-assessment allows you to reflect on and evaluate your practice in relation to the *Practice Expectations*. Remember, there are no right or wrong answers. Completing a self-assessment helps you identify your personal and professional strengths and any areas where you can improve. It also allows you to reflect on your own beliefs, attitudes and values and consider how they influence your practice.

Who is your client?

Identify who your client is before you complete your self-assessment. Your client is the beneficiary of your care and/or service and may be an individual, family, group, community or population. Remember, your client is also an important member of the entire health-care team.

In some clinical settings, client may be referred to as a patient or a resident. Depending on your registered nursing domain, client may also refer to a nursing student, research subject/participant or another RN or RN(NP).

You apply the nursing process in your practice, planning the needs of clients through assessment, diagnosis or determination, planning, implementation, and evaluation. The principles of client-centred practice in a clinical practice setting also apply in other domains such as administration, education, and research.

What else do you need to know?

- You must complete the self- assessment applicable to your membership class and notation (if applicable). If you changed membership class or received a new notation (e.g. RN(AP)) prior to October 1 you must complete the self-assessment for the membership class or notation you wish to renew.
- If you select “not applicable” to the indicators on your self-assessment, please get in touch with us as your practice may not be RN practice.
- Keep your forms for the required five years and compare your scores from one year to the next to evaluate if you are maintaining or improving your practice in relation to the practice expectations.
- Looking for more tips on how to reflect on your practice? See our self-assessment reflection exercise available on page 12.

Part B: Learning Plan

What is the purpose of a learning plan?

A key goal of regulation is ensuring that RNs practise in a safe, competent, and ethical manner. Registered nursing is a self-regulated profession, which means it's important we maintain high standards to serve and protect the public interest.

Participating in self-reflection and completing a learning plan demonstrates to the public that you are engaged in lifelong learning and committed to enhancing your practice. By identifying learning goals and creating a plan to achieve those goals, you can focus on specific areas of your practice that you want to improve.

Your learning plan gives you the opportunity to:

- grow as a professional by identifying a learning goal that is relevant to your practice setting, but one that is beyond what your employer requires you to complete (i.e. your learning needs to be self-directed so choosing a learning goal that your employer already requires you to do would not meet expectations)
- document how your learning impacted your practice and assess whether you met your goal.

You're learning and activities need to be self-directed so choosing a learning goal or activity that your employer already requires you to do would not meet expectations.

- *Examples include keeping up to date on procedures, CPR courses, ACLS, PALS, etc.*

What are the components of the learning plan?

Goal Setting: Set one learning goal to enhance your practice

If you are having difficulty identifying a learning goal, consider asking yourself:

- What learning opportunities foster meaning and professional growth?
- What can I learn to enhance my practice?
- What can I learn to positively impact client care in my practice area?
- What am I curious about?

Consider beginning your statement with:

- I will **learn how** to...
- I will **enhance** my knowledge related to...
- I will **develop** the new skill of...

To make sure your learning goal will enhance your practice. Ask yourself:

- Will my goal **increase** my knowledge and understanding?
- Will my goal **improve** my problem-solving or critical thinking skills?
- Will my goal **impact** my attitude, feelings, or emotions?
- Will my goal **enhance** my nursing practice?

If you answer “no” to all these questions, your goal may not be a learning goal. You are welcome to contact us if you need help creating a learning goal.

When setting a goal, we recommend you follow the SMART principle:

- **Specific:** Setting a specific learning goal will increase the chances of you being able to achieve your goal.
- **Measurable:** How will you know when you have achieved your goal? What results will you see when your goal is achieved?
- **Attainable:** Set a learning goal and learning activity that can be completed by Dec. 1 of the current year.
- **Relevant:** Is your learning goal related to your current role and responsibilities? If you are not currently working, make sure you choose a learning goal that helps prepare you for your return to work.
- **Timely:** Document an expected date of completion to keep yourself on track. Ensure you have enough time to complete and reflect on your learning before Dec. 1 of the current year.

An example of a SMART learning goal is: I will learn at least three signs or symptoms of caregiver stress and two interventions related to managing it by Oct. 1. This will help me provide enhanced care to families at risk of or who are already experiencing caregiver stress.

Learning Activities: Complete at least one learning activity related to your learning goal.

You need to complete your learning activities by Dec. 1 to meet the requirements to renew your certificate of practice for the upcoming year. Your learning activities can be formal or informal and may include:

- reading journal articles or textbooks
- attending workshops or conferences
- seeking peer feedback
- networking with subject matter experts
- attending seminars or in-services

- watching a video
- participating in a clinical case study
- enrolling in continuing education courses

Remember to include details of your learning, such as the title of the article you read, the date you went to a workshop or the name of the conference you attended. A reminder that you cannot use our jurisprudence learning module as a learning activity must be self-directed, and this is a requirement.

Impact on Practice: Documenting the impact on your practice.

This section provides an opportunity for you to reflect on your learning and evaluate if you met your goal, and identify the impact on your practice.

If you are currently working, you should allow enough time to integrate your learning into your practice before documenting it in this section of your forms. This will allow you to reflect upon and evaluate if integrating the learning enhanced your practice.

If you are not currently working, you will identify the key learning(s) and identify how you will integrate your learning into your practice and the expected outcome.

To begin the reflection process, you may consider asking yourself the following questions:

- What new information did I learn?
- Did I meet my goal?
- How do I know I met my goal?
- How am I integrating what I've learned into my practice?
- Did I share my new knowledge with others?
- What am I going to do differently?

We do not require additional proof (e.g. copies of journal articles) showing you completed your activities).

How can I evaluate my learning plan to make sure it meets expectations?

The scoring rubric that is used to assess your learning plan is available on page 11. We also provide some examples of learning plans on page 12. Use these resources to make sure your learning plan meets the criteria.

If you're still not sure that you completed your learning plan correctly, feel free to get in touch with us so we can help. Remember, we're here to support you throughout this process.

Part C: Jurisprudence Learning Module

Jurisprudence is a legal term that refers to studying the law. For our purpose, jurisprudence is about ensuring you are aware of legislation, regulations, standards, and policies that affect your registered nursing practice. You can use this section of the forms to take notes while completing the current year's required module.

More information about the jurisprudence learning module is available on our website.

Part D: Learning Activities (Optional)

Use this section to keep track of any learning activities you complete that are not related to your learning plan in Part B.

CCP Planning Timeline

Below is a suggested timeline to help you plan and complete your CCP activities:

<p>Dec. 1 - January</p>	<ul style="list-style-type: none"> • Download the CCP forms for the upcoming year • Complete your self-assessment • Begin your learning plan by setting at least one learning goal and activity
<p>March</p>	<ul style="list-style-type: none"> • Review and update your learning plan • Is your learning goal still applicable? Are you on target to complete your learning activity?
<p>April</p>	<ul style="list-style-type: none"> • Complete the current year’s jurisprudence learning module, and ensure your CRNM Profile shows the module is complete
<p>July</p>	<ul style="list-style-type: none"> • RNs selected to participate in the CCP review are notified by email
<p>September</p>	<ul style="list-style-type: none"> • Complete your learning plan, including an explanation of how your learning impacted your practice
<p>October - Dec. 1</p>	<ul style="list-style-type: none"> • Complete your online renewal application • Ensure your CCP requirements are complete before you declare it on your online renewal application • Ensure you’ve completed the necessary jurisprudence learning module

Learning Plan Scoring Rubric

CCP reviewers use the following rubric to evaluate an RN or RN(NP)'s learning plan.

Learning plan	No	Yes	Exemplary
<p>Does the learning plan include a self-directed learning goal that enhances the quality of current practice?</p> <p><i>(Needs to go above and beyond the learning that is required to maintain practice both by employer and)</i></p>	<ul style="list-style-type: none"> There is no learning goal listed (activities are not learning goals) or The goal is not self-directed or The goal is too vague to identify the learning need or The goal listed is not relevant to the activities or impact statement 	<ul style="list-style-type: none"> The learning goal is clearly self-directed, specific and directly related to the RN or RN(NP)'s learning activity(ies) and impact on practice <p><i>It is recommended that goals be SMART (Specific, Measurable, Attainable, Relevant and Timely). SMART goals help to clearly identify what you are learning, and why this is important.</i></p>	<ul style="list-style-type: none"> The learning goal is clearly self-directed, specific, and directly related to the RN or RN(NP)'s learning activity(ies) and impact on practice and The learning goal is unique or innovative
<p>Does the learning plan include evidence of at least one completed learning activity?</p>	<ul style="list-style-type: none"> There is no evidence of a completed learning activity from Jan. 1 to Dec. 1 of the registration year or The activity(ies) do not reflect the goal or The activity(ies) are not self-directed or The activity(ies) are not clearly identified (state article was read, or a webinar attended but do not identify the names or include the URL) 	<ul style="list-style-type: none"> A completion date between Jan. 1 to Dec. 1 of the registration year is documented and Evidence exists within the impact on practice statement regarding the completion of a learning activity(ies) and Activity(ies) are clearly identified 	<ul style="list-style-type: none"> The specific titles and completion dates for the learning activity(ies) clearly relate to the goal and impact on the RN or RN(NP)'s practice
<p>Does the learning plan identify that completing the learning activity impacted or will impact the RN or RN(NP)'s practice?</p>	<ul style="list-style-type: none"> There is no evidence of learning that impacted the RN or RN(NP)'s practice 	<ul style="list-style-type: none"> There is evidence that the RN or RN(NP) completed learning, and demonstrate how this impacted, or will impact their practice 	<ul style="list-style-type: none"> The learning plan had excellent flow, presentation and the impact on the RN or RN(NP)'s practice is clearly articulated and/or It is evident that client care has been improved because of the RN or RN(NP)'s learning

CCP Resources

- [CCP forms](#)
- [Continuing Competency Program](#)
- [CCP Forms Tutorial](#)
- [CCP Journey](#)
- [Self-Assessment Resources & Reflection Exercise](#)
- [Examples of learning plans](#)
- [CCP review FAQs](#)
- [CCP review outcomes](#)
- [Practice Expectations for RNs](#)
- [Practice Expectations for RN\(NP\)s](#)
- [Practice Expectations for RN\(AP\)s](#)

CCP Review (and Multi-Source Feedback)

Each year, all RNs complete the CCP. In addition to this, some are selected to participate in the CCP review, which includes multi-source feedback.

The review is a **supportive process** and is not disciplinary in nature. Rather, it's an opportunity to learn more about your practice as you receive feedback from your clients and colleagues.

If you're required to complete the CCP review, including multi-source feedback, we'll notify you by email in July and send a package with detailed instructions to your preferred mailing address.

Continue reading through this workbook to learn more about the CCP review and multi-source feedback. Remember, you only have to complete multi-source feedback if you're selected for the review or have been referred to the program.

CCP Review Timeline

<p>July</p>	<ul style="list-style-type: none"> • RNs selected for the review are notified by email. If you receive an email letting you know you've been selected for the review, you should review this workbook in detail to learn more about what you'll need to do.
<p>September - November</p>	<ul style="list-style-type: none"> • Your multi-source feedback package is mailed to you. When you receive your package, follow the instructions in the included letter and use this workbook as a resource too. • Participate in multi-source feedback.
<p>Oct. 1 - Dec. 1</p>	<ul style="list-style-type: none"> • You can complete your online renewal application during this time. Before you log in to renew, make sure you have already completed your jurisprudence, and Parts A and B of your CCP forms as you will be asked to enter this information into your online application. In mid-December, your learning plan will be reviewed using the scoring rubric and we'll enter the results into our database.
<p>January - February</p>	<ul style="list-style-type: none"> • The results from multi-source feedback are collated and your multi-source feedback report is created. We will email you these results in February. See the list of possible outcomes of the review on page 25.
<p>March - May</p>	<ul style="list-style-type: none"> • We follow up with anyone who did not meet the review requirements and work with them to complete next steps based on their outcomes.
<p>May - July</p>	<ul style="list-style-type: none"> • During this time, our Continuing Competency Committee reviews files of RNs who completed a competency-based interview and determines if there are any additional activities an RN still needs to complete. These activities may include completing course work, attending a workshop, writing a reflective paper, or any other remedial activity the Committee determines to be appropriate.

About Multi-Source Feedback

Multi-source feedback focuses on communication and professional behaviour. The multi-source feedback questions are based on the *Entry-Level Competencies for Registered Nurses*. Receiving feedback about these aspects of practice can help RNs meet the *Practice Expectations*.

The College exists to serve and protect the public interest, and multi-source feedback supports this:

- **It empowers members of the public** by giving them an opportunity to provide feedback on the care they received
- **It enhances an RN's practice** by providing them with valuable feedback from those directly impacted by their practice

What does the College already believe and assume?

- All RNs are committed to obtaining the knowledge, skill, and judgment they need in order to provide safe, competent and ethical care.
- RNs practise according to the values and responsibilities in the *Code of Ethics* and other professional standards, laws and regulations supporting ethical practice.
- RNs are honest and practise with integrity in all their professional interactions.
- The public expects RNs to be current and competent in their practice.
- Our *Practice Expectations for RNs* provide a foundation for the program and describe reasonable and prudent nursing practice.

Goals

Multi-source feedback has several goals:

- Increase self-awareness
- Clarify behaviour
- Encourage personal/professional development
- Increase accountability
- Enhance performance

What You Need to Do

If you're required to complete multi-source feedback, here's what you'll need to do:

1. Read this workbook to assist you in completing multi-source feedback.
2. **Follow the instructions in your notification email to:**
 - a) confirm we have the correct address on file for you, and
 - b) identify the package you will need: clinical or non-clinical
 - i. **clinical** → you provide direct care to clients (over 75% of your work is spent directly with clients).
 - ii. **non-clinical** → you do not provide direct care to clients

It may be helpful to **review the questionnaires** (clinical and non-clinical) to determine which set of questions is most applicable to your practice. You can find these samples on pages 27- 34.

There may be questions that are not applicable to your practice at all, but there should not be many of those. Ask yourself questions like “where do I spend the majority of my practice?” and “do I provide direct care to clients or not?”

If most of your work (i.e. over 75%) is spent directly with clients, you should choose the clinical package.

3. After you have completed steps one and two, we'll send you your unique multi-source feedback package in the mail to the address you provided. This typically occurs in September.
4. When you receive your package, your unique ID and password will be included in the notification letter. The package will have login information. **You will login and complete your online self-assessment.**
5. Hand out the envelopes to your colleagues and clients (if applicable). Your colleagues will complete the questionnaire online, and your clients have the option to complete online, or the paper questionnaire provided (included is a prepaid business return envelope).
6. The external vendor handling the questionnaires will provide email updates of how many questionnaires have been returned. You require a minimum of **six** responses from your colleagues and **8** from your clients.
7. If you have any questions, contact us at ccp@crnm.mb.ca or 204-774-3477 ext 657.

Deferral

In order to participate in multi-source feedback, you must be working during the hand out time frame (mid-September to November). If you are not or will not be working, you will need to complete the [multi-source feedback deferral form](#) and submit it to the College by the date indicated in your letter.

What is included in my multi-source feedback package?

Your package will include:

1. A notification letter containing your unique ID number and password
2. 18 sealed client envelopes which include a prepaid return envelope (for clinical RNs only)
3. 18 public awareness pamphlets (for clinical RNs only)
4. 10 sealed colleague envelopes

Do not open the sealed client and colleague envelopes. These envelopes contain:

- An instruction letter (see samples on pages 27 and 30)
- A multi-source feedback questionnaire (see samples on pages 28, 29 and 31)
- A self-addressed, postage-paid envelope for clients only.

Samples of these are included on the pages mentioned. The RN(NP) instructions and questionnaires are the same as the RN versions with the exception of reference to “RN(NP)” instead of “RN”.

What do I do with the sealed envelopes?

1. **Confirm that your unique ID number is correct** on the sealed client and colleague envelopes. The ID number is visible in the window of the envelope. Do not open the envelope to check for the ID number.
2. **Choose up to 10 colleagues to complete the questionnaires. At least six colleague questionnaires must be submitted to create your report.**
3. **Choose up to 18 clients to complete the forms (for clinical RNs only). At least eight client questionnaires are needed to create your report.**
4. **Provide the appropriate sealed envelopes to the selected colleagues/clients** with instructions to complete and submit their questionnaire by the date indicated in your notification email. For RNs participating in the CCP review, the deadline for colleagues and clients to complete the questionnaire is Nov. 30 for online, and mail in should be in the mail prior to the last week of November (our third party provider will receive completed questionnaires until Dec. 1).

5. **If the sealed envelope was not sealed closed or if you opened an envelope by mistake, you may not use that envelope to give to a colleague or client.**

Who are colleagues?

Colleagues are **both regulated and unregulated health-care providers** you interact with in person or on the phone and may include:

- RNs or RN(NP)s
- Staff who report to you
- Your manager or supervisor
- Reception or administration support staff
- Other health-care providers (i.e. LPNs, RPNs, physicians, occupational therapists, physiotherapists, dieticians, pharmacists...)

Choose colleagues who are familiar with your role and can provide constructive feedback. Please use your professional judgment to determine appropriate colleagues to complete the forms.

Who are clients?

For the purposes of multi-source feedback, a client is a member of the public who you will provide nursing services to at any time over the period that you have been given to participate in multi-source feedback. **Client may also include a caregiver, family member of the client or substitute decision-maker who is familiar with the client care you provided.** You cannot contact previous clients to complete the multi-source feedback questionnaire. Accessing client records for the purposes of multi-source feedback could be considered a breach of client confidentiality.

When you approach clients to complete the questionnaire, advise them the information will be kept confidential, and that you will not be seeing their responses. Please advise clients that their responses will not affect current or future services/care they receive. A public awareness pamphlet (see example on page 34) is included in your package, and we encourage you to hand this out to your clients when asking them to complete the questionnaires.

We know that some RNs may feel hesitant to ask clients to complete a questionnaire. Keep in mind that in most situations, these individuals want to provide feedback on the care they have received. RNs empower clients by giving them the right to choose to participate in this process.

How are the questionnaires submitted?

Clients can complete the questionnaires in one of two ways:

- a) **Online:** Unique access code and user ID are enclosed in the sealed envelope, or
- b) **On paper:** clients seal the completed questionnaire in the self-addressed, postage-paid envelope. They also need to initial the back of the envelope to ensure added security. Envelopes received with a broken seal will not be included in the overall results. Clients can also return the completed questionnaire to you, sealed in the self-addressed, postage-paid envelope so you can mail it.

Colleagues must complete the questionnaire online.

Feedback Questionnaires

Multi-source feedback is designed to collect information about your professional interactions and evaluate your knowledge, skill and judgment related to **professional behaviours and communication skills**.

There are four types of questionnaires:

1. **My Form self-assessment questionnaire (available online only) – *this is an opportunity for you to reflect on your practice in relation to the Entry-Level Competencies and is separate from the self-assessment in your CCP forms***
2. Clinical colleague questionnaire (available online only)
3. Non-clinical colleague questionnaire (available online only)
4. Client questionnaire*

**If you work in a non-clinical setting, you will not receive any client envelopes in your package.*

Each questionnaire consists of a series of statements that describe the practice expectations of an RN. The questionnaires are meant to be relevant to different roles and practice settings and are developed in user-friendly terms for ease of completion. Colleagues and clients rate each statement on a nine-point scale.

If a statement doesn't apply to your practice, the client or colleague can select NA ("not applicable"). This does not negatively impact your result.

What needs to be completed in order to create my report?

- 1 My Form questionnaire
- 6 colleague questionnaires
- 8 client questionnaires (if you provide direct client care) in order to receive client feedback in your report

Our expectation is that you will receive the minimum number of client responses (if applicable). However, if you do not, this will not impact your ability to renew your certificate of practice. Possible outcomes of the CCP Review can be found on page 25.

Why do I need to submit this many forms?

Research shows this number of forms submitted will ensure stable, meaningful, and anonymous results.

Tips for Handing out the Questionnaires

- Approach your clients and colleagues as soon as possible.
- Ask more than the required number of people to complete them.
- Inform clients/colleagues of the deadline to submit their questionnaires.
- Inform clients/colleagues that it only takes about 10 minutes to complete the questionnaire and that their input is used to help enhance nursing practice.
- Inform clients/colleagues that this process is confidential and individual responses are not shared with you.
- If needed, ask a client's caregiver, family member or substitute decision maker who is familiar with the care you provided to complete the questionnaire on behalf of your client.
- You can identify that the College of Registered Nurses of Manitoba is responsible for ensuring the public receives safe, competent, and ethical care, and they monitor this through the CCP of which MSF is a part. The CCP is a legislated requirement of our profession.
- Receiving this feedback provides you with knowledge around your professional communication and behaviour and allows you to identify areas of improvement.

Confidentiality

The College has taken steps to ensure confidentiality with this process.

1. There is no information on the questionnaires to identify your colleagues or clients. When you receive your results, it will be a summary of all the feedback gathered.
2. The information collected from the multi-source feedback will not be shared with anyone outside of the College. This means employers will not receive a copy of your results. If you want to share them with your manager/employer, this is your choice.

In accordance with Council policy AA-5, evidence of continuing competency submitted by registrants will not be used in matters related to complaints arising outside the College, shall not be released to the College's Complaints Investigation Committee, investigators, practice auditors or a panel of the College's Inquiry Committee, or at an appeal arising under *The Regulated Health Professions Act*.

Your Results

How will I receive my results?

Your results will be available via a report which will be emailed to you mid-February

Reading the Report




The multi-source feedback results are separated into three groups, each with their own set of results:

- Client (only for RNs in clinical practice)
- Colleagues
- My Form

The results are displayed as follows:

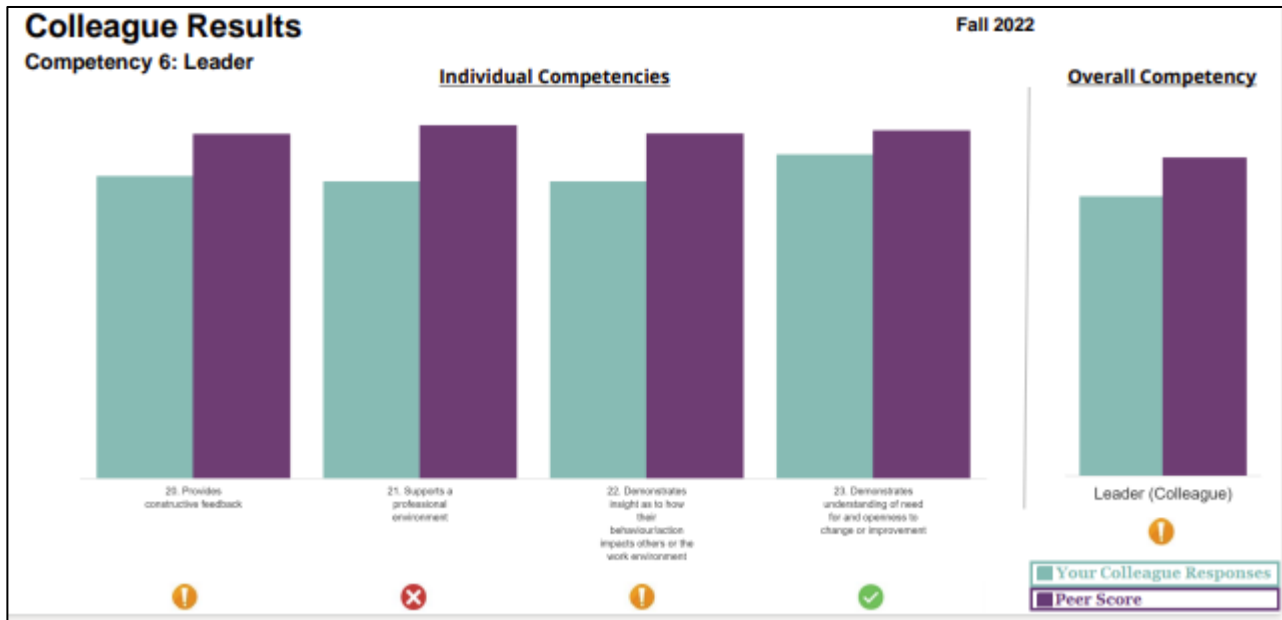
- **Your Score:** The average rating you received based on the responses submitted.
- **Peer Score:** The benchmark to which your score is compared to and is based on the average score of RNs who have participated in multi-source feedback.

To assist with the interpretation of your individual results, the report includes three symbols. These symbols are visual cues to assist with the identification of competency areas and how the rating you received from your clients and colleagues compares to the benchmark.

 Above or minimally below the benchmark	 Below the benchmark	 Markedly below the benchmark
<ul style="list-style-type: none">• This is an indication your individual rating on this competency is very close to the benchmark.• This is an opportunity for you to reflect on how you can maintain this level of practice.	<ul style="list-style-type: none">• This is an indication your individual rating on this competency is somewhat below the benchmark.• This is an opportunity for you to reflect on how you could improve in this competency.	<ul style="list-style-type: none">• This is an indication that you should address this competency. Reflect on why you may have scored lower on this competency and make plans to take action to improve your score.• You can contact the CCP Team if you need assistance finding resources to address these competencies.

We have provided these symbols to allow you to identify specific competency areas that are below or markedly below the benchmark and are areas you should focus on to enhance your quality of practice.

Interpreting the Report



- Compare your client and colleague results to the benchmark of all RNs and RN(NP)s who participated in multi-source feedback.
- Reflect on which areas you individually scored highest and lowest on.
- Reflect on how you might enhance or maintain your quality of practice.
- Reflect on your My Form results and consider how you rated yourself compared to how your colleagues rated you. Think about why there may be a difference.
- It may be useful to discuss your results with a trusted colleague. Consider asking a colleague to:
 - review your results with you and make constructive suggestions based on the results, and/or
 - observe you in direct practice and provide constructive feedback on how you can improve.

Applying your results to practice

Update your Self-Assessment and Learning Plans

Use the results to inform your self-assessment in your CCP forms and to help provide focus to your learning goals when completing your learning plan.

How the College uses the Results

The College will use the results only within the context for which you were referred for multi-source feedback. For example, if you are selected for the continuing competency program review, your results will be compared to a benchmark score.

What is a benchmark score?

Norms are statistics that are derived from a selected group and are used as a measure in a standardized way. They stand for a normal frequency distribution representing the probability that a majority of randomly selected RNs will fall within the middle of the distribution. Norms allow you to compare your scores to other RNs who have participated in multi-source feedback.

Benchmark or cut-off results are based on two statistical concepts:

1. **Z-score** – a “standardized score”. A z-score tells how a single point of data compares to the norm. It indicates whether the point is above or below the average and how unusual the measurement is from the norm.
2. **Percentile Rank** – establishing a relative position of a person’s score, compared to other people’s scores.

A Z-score is calculated for each RN who participates in the process. The College then establishes the percentile which is used as the cut-off score. RNs and RN(NP)s who are below the cut-off score may be required to do a further in-depth assessment.

CCP Review Outcomes

Learning Plan Outcomes

CCP reviewers use the scoring rubric to evaluate learning plans submitted online during renewal. There are four possible outcomes for a learning plan:

1. **Exemplary:** This result means the learning plan met all requirements and has excellent flow, presentation and/or innovative qualities. Registrants whose learning plans are identified as exemplary are asked if a de-identified version of their learning plan can be posted to the College website as examples for other registrants.

*A minimum of two CCP reviewers (Quality Practice Consultants) must reach consensus, using the scoring rubric, for a learning plan to be determined as **exemplary**.*

2. **Met:** This result means the learning plan has met the requirements of the program. The learning plan demonstrates planned learning and integration of learning into practice. All three questions on the scoring rubric are “yes”. No further follow-up required.

3. **Met with recommendation:** This result means the learning plan demonstrates completion of a learning activity and integration of learning into practice; however, there is room for improvement. Recommendation to refer to available CCP resources will be provided. No further follow-up required.

4. **Not Met:** This result means the learning plan does **not** demonstrate evidence of self-directed learning or integration of learning into practice. Registrants whose learning plans are identified as not met are encouraged to seek additional support by meeting with Quality Practice Advisor to understand why their plan did not meet criteria. They will be required to submit their learning plan on the following year’s registration renewal application.

*A minimum of two CCP reviewers (Quality Practice Consultants) must reach consensus, using the scoring rubric, for a learning plan to be determined as **not met**.*

Multi-Source Feedback Outcomes

Multi-source feedback results are collated and provided in a report. Each registrant receives a summary of feedback received from colleagues and clients (if applicable). This feedback is compared to the cumulative average score of all nurses who have participated in multi-source feedback. This average score is the benchmark that determines if further follow-up is required. There are five possible outcomes for multi-source feedback:

1. **Complete - Above Benchmark:** This result means the minimum number of colleague and client (if applicable) responses were received and the results are above the benchmark (the average score of all nurses who have participated in multi-source feedback). No further follow-up required.
2. **Complete - Below Benchmark:** This result means the minimum number of colleague and client (if applicable) responses were received but the results are below the benchmark (the average score of all nurses who have participated in multi-source feedback). The next step is to complete a competency-based interview.
3. **Partial Complete - Above Benchmark:** If engaged in the clinical stream of multi-source feedback, this result means the minimum number of responses from your clients **or** colleagues was not received, and the report from your clients or colleagues is above the benchmark (the average score of all nurses who have participated in multi-source feedback). The next step is to complete a reflective exercise on the value of client and/or colleague feedback. The exercise must describe how the registrant engaged in the process, how they can or have used feedback to enhance their practice, and how they actively work to obtain client and family and/or colleague feedback and incorporate it into their practice. Information will be provided with the outcomes.
4. **Partial Complete - Below Benchmark:** If engaged in the clinical stream of multi-source feedback, this result means the minimum number of responses from your clients **or** colleagues to create a full report was not received, and the remaining report from your clients **or** colleagues was below the benchmark (the average score of all nurses who have participated in multi-source feedback). The next steps are to:
 - a. Complete a competency-based interview.
 - b. Complete an exercise on the value of client and/or colleague feedback. The exercise must describe how the registrant engaged in the process, how they can or have used feedback to enhance their practice, and how they actively work to obtain client and family and/or colleague feedback and incorporate it into their practice. Information will be provided with the outcomes.
5. **Incomplete:** This result means the minimum number of colleague and client (if applicable) responses were not received. The next steps are to:
 - a. Complete a competency-based interview.
 - b. Complete an exercise on the value of client and/or colleague feedback. The exercise must describe how the registrant engaged in the process, how they can or have used feedback to enhance their practice, and how they actively work to obtain client and family and colleague feedback and incorporate it into their practice. Information will be provided with the outcomes.



THE QUESTIONNAIRES:

College of
Registered Nurses
of Manitoba

Multi-Source Feedback My Form for Clinical RNs

Unique ID:

Unique Password:

Please rate yourself based on the statements below. Circle the appropriate number in each row. If you are not able to answer questions, please select NA (not applicable).

Question	Below Expectations			Met Expectations			Above Expectations			
Clinical										
1. Demonstrates the required knowledge, skill, and judgment required to fulfill their role.	1	2	3	4	5	6	7	8	9	NA
2. Asks clients about their wishes and needs.	1	2	3	4	5	6	7	8	9	NA
3. Completes a thorough assessment of the client's physical, emotional, mental, cultural, and spiritual needs.	1	2	3	4	5	6	7	8	9	NA
4. Follows infection control policies and procedures.	1	2	3	4	5	6	7	8	9	NA
Professional										
5. Takes responsibility for own actions and decisions.	1	2	3	4	5	6	7	8	9	NA
6. Demonstrates honesty, integrity, and respect in all professional interactions.	1	2	3	4	5	6	7	8	9	NA
7. Maintains confidentiality of client information.	1	2	3	4	5	6	7	8	9	NA
8. Respects others' values and beliefs.	1	2	3	4	5	6	7	8	9	NA
9. Maintains professional boundaries with clients and the health care team.	1	2	3	4	5	6	7	8	9	NA
Communicator										
10. Communicates effectively in complex and rapidly changing situations.	1	2	3	4	5	6	7	8	9	NA
11. Communicates in a clear manner (written or verbal).	1	2	3	4	5	6	7	8	9	NA
12. Reports client care in a clear manner (written or verbal).	1	2	3	4	5	6	7	8	9	NA
13. Manages conflict or disagreement effectively.	1	2	3	4	5	6	7	8	9	NA
Collaborator										
14. Interacts positively with others.	1	2	3	4	5	6	7	8	9	NA
15. Positively contributes to team interactions (e.g. during staff meeting, family meeting, case conferences, rounds).	1	2	3	4	5	6	7	8	9	NA
16. Collaborates with others to support client- or work-related activities and outcomes (e.g. for unit, program, health systems).	1	2	3	4	5	6	7	8	9	NA
Coordinator										
17. Asks colleagues to collaborate on the client's plan of care.	1	2	3	4	5	6	7	8	9	NA
18. Demonstrates leadership qualities in the coordination of client care.	1	2	3	4	5	6	7	8	9	NA
19. Prioritizes and manages workload to meet demands.	1	2	3	4	5	6	7	8	9	NA
Leader										
20. Provides constructive feedback.	1	2	3	4	5	6	7	8	9	NA
21. Supports a professional environment.	1	2	3	4	5	6	7	8	9	NA
22. Demonstrates insight as to how their behaviour/action impacts others or the work environment.	1	2	3	4	5	6	7	8	9	NA
23. Demonstrates understanding of need for and openness to change or improvement.	1	2	3	4	5	6	7	8	9	NA
Advocate										
24. Verifies that client has an adequate understanding of essential information and skills to actively participate in own care.	1	2	3	4	5	6	7	8	9	NA
25. Supports the client in making informed decisions.	1	2	3	4	5	6	7	8	9	NA
26. Takes action to reduce risk to clients (e.g. reports incidences, near missed events or errors; follows fall-prevention or harm-reduction strategies).	1	2	3	4	5	6	7	8	9	NA



Unique ID:

Unique Password:

Please rate yourself based on the statements below. Circle the appropriate number in each row. If you are not able to answer questions, please select NA (not applicable).

Question	Below Expectations			Met Expectations			Above Expectations			
Professional										
1. Takes responsibility for own actions and decisions.	1	2	3	4	5	6	7	8	9	NA
2. Takes action on unsafe practices and workplace risks.	1	2	3	4	5	6	7	8	9	NA
3. Respects and welcomes the opinion of others.	1	2	3	4	5	6	7	8	9	NA
4. Introduces self as a registered nurse/nurse practitioner.	1	2	3	4	5	6	7	8	9	NA
5. Demonstrates professional behaviours (trustworthy, respectful, accountable, transparent, empathetic).	1	2	3	4	5	6	7	8	9	NA
6. Minimizes potential risk of a breach in confidentiality of personal information.	1	2	3	4	5	6	7	8	9	NA
7. Considers the values and beliefs of others.	1	2	3	4	5	6	7	8	9	NA
8. Maintains professional boundaries with others.	1	2	3	4	5	6	7	8	9	NA
Communicator										
9. Communicates effectively in complex and rapidly changing situations.	1	2	3	4	5	6	7	8	9	NA
10. Communicates in a clear manner (written or verbal).	1	2	3	4	5	6	7	8	9	NA
11. Manages conflict or disagreement effectively.	1	2	3	4	5	6	7	8	9	NA
Collaborator										
12. Builds and promotes interprofessional collaborative relationships.	1	2	3	4	5	6	7	8	9	NA
13. Interacts positively with others.	1	2	3	4	5	6	7	8	9	NA
14. Collaborates with others to support positive client- or work-related outcomes (e.g. for unit, program, health systems).	1	2	3	4	5	6	7	8	9	NA
15. Positively contributes to team interactions (e.g. during staff meeting, family meeting, case conferences, rounds).	1	2	3	4	5	6	7	8	9	NA
Leader										
16. Demonstrates understanding of need for and openness to change or improvement.	1	2	3	4	5	6	7	8	9	NA
17. Acts as a positive role model and mentor.	1	2	3	4	5	6	7	8	9	NA
18. Provides constructive feedback.	1	2	3	4	5	6	7	8	9	NA
19. Listens to and learns from others.	1	2	3	4	5	6	7	8	9	NA
20. Demonstrates insight as to how their behaviour/action impacts others or the work environment.	1	2	3	4	5	6	7	8	9	NA
21. Creates and supports a respectful and emotionally safe practice environment.	1	2	3	4	5	6	7	8	9	NA
22. Considers the organization's culture in decision making.	1	2	3	4	5	6	7	8	9	NA
23. Takes action to support a high-quality practice environment.	1	2	3	4	5	6	7	8	9	NA
Scholar										
24. Uses best evidence to make informed decisions.	1	2	3	4	5	6	7	8	9	NA
25. Translates new information or literature into action in a practical way.	1	2	3	4	5	6	7	8	9	NA
26. Stays current and promotes best practices.	1	2	3	4	5	6	7	8	9	NA



Unique ID:

Unique Password:

Please rate your registered nurse or nurse practitioner colleague on the statements below. Circle the appropriate number in each row. If you are not able to answer questions, please select NA (not applicable).

Question	Below Expectations			Met Expectations			Above Expectations				
	1	2	3	4	5	6	7	8	9		
Clinical											
1. Demonstrates the required knowledge, skill, and judgment required to fulfill their role.	1	2	3	4	5	6	7	8	9	NA	
2. Asks clients about their wishes and needs.	1	2	3	4	5	6	7	8	9	NA	
3. Completes a thorough assessment of the client's physical, emotional, mental, cultural, and spiritual needs.	1	2	3	4	5	6	7	8	9	NA	
4. Follows infection control policies and procedures.	1	2	3	4	5	6	7	8	9	NA	
Professional											
5. Takes responsibility for own actions and decisions.	1	2	3	4	5	6	7	8	9	NA	
6. Demonstrates honesty, integrity, and respect in all professional interactions.	1	2	3	4	5	6	7	8	9	NA	
7. Maintains confidentiality of client information.	1	2	3	4	5	6	7	8	9	NA	
8. Respects others' values and beliefs.	1	2	3	4	5	6	7	8	9	NA	
9. Maintains professional boundaries with clients and the health care team.	1	2	3	4	5	6	7	8	9	NA	
Communicator											
10. Communicates effectively in complex and rapidly changing situations.	1	2	3	4	5	6	7	8	9	NA	
11. Communicates in a clear manner (written or verbal).	1	2	3	4	5	6	7	8	9	NA	
12. Reports client care in a clear manner (written or verbal).	1	2	3	4	5	6	7	8	9	NA	
13. Manages conflict or disagreement effectively.	1	2	3	4	5	6	7	8	9	NA	
Collaborator											
14. Interacts positively with others.	1	2	3	4	5	6	7	8	9	NA	
15. Positively contributes to team interactions (e.g. during staff meeting, family meeting, case conferences, rounds).	1	2	3	4	5	6	7	8	9	NA	
16. Collaborates with others to support client- or work-related activities and outcomes (e.g. for unit, program, health systems).	1	2	3	4	5	6	7	8	9	NA	
Coordinator											
17. Asks colleagues to collaborate on the client's plan of care.	1	2	3	4	5	6	7	8	9	NA	
18. Demonstrates leadership qualities in the coordination of client care.	1	2	3	4	5	6	7	8	9	NA	
19. Prioritizes and manages workload to meet demands.	1	2	3	4	5	6	7	8	9	NA	
Leader											
20. Provides constructive feedback.	1	2	3	4	5	6	7	8	9	NA	
21. Supports a professional environment.	1	2	3	4	5	6	7	8	9	NA	
22. Demonstrates insight as to how their behaviour/action impacts others or the work environment.	1	2	3	4	5	6	7	8	9	NA	
23. Demonstrates understanding of need for and openness to change or improvement.	1	2	3	4	5	6	7	8	9	NA	
Advocate											
24. Verifies that client has an adequate understanding of essential information and skills to actively participate in own care.	1	2	3	4	5	6	7	8	9	NA	
25. Supports the client in making informed decisions.	1	2	3	4	5	6	7	8	9	NA	
26. Takes action to reduce risk to clients (e.g. reports incidences, near missed events or errors; follows fall-prevention or harm-reduction strategies).	1	2	3	4	5	6	7	8	9	NA	
27. I would choose to work with this person on a specific task or project.							<input type="radio"/>	Yes	<input type="radio"/>	No	



Multi-Source Feedback Non-Clinical Colleague Form

Unique ID:

Unique Password:

Please rate your registered nurse or nurse practitioner colleague on the statements below. Circle the appropriate number in each row. If you are not able to answer questions, please select NA (not applicable).

Question	Below Expectations			Met Expectations			Above Expectations			
Professional										
1. Takes responsibility for own actions and decisions.	1	2	3	4	5	6	7	8	9	NA
2. Takes action on unsafe practices and workplace risks.	1	2	3	4	5	6	7	8	9	NA
3. Respects and welcomes the opinion of others.	1	2	3	4	5	6	7	8	9	NA
4. Introduces self as a registered nurse/nurse practitioner.	1	2	3	4	5	6	7	8	9	NA
5. Demonstrates professional behaviours (trustworthy, respectful, accountable, transparent, empathetic).	1	2	3	4	5	6	7	8	9	NA
6. Minimizes potential risk of a breach in confidentiality of personal information.	1	2	3	4	5	6	7	8	9	NA
7. Considers the values and beliefs of others.	1	2	3	4	5	6	7	8	9	NA
8. Maintains professional boundaries with others.	1	2	3	4	5	6	7	8	9	NA
Communicator										
9. Communicates effectively in complex and rapidly changing situations.	1	2	3	4	5	6	7	8	9	NA
10. Communicates in a clear manner (written or verbal).	1	2	3	4	5	6	7	8	9	NA
11. Manages conflict or disagreement effectively.	1	2	3	4	5	6	7	8	9	NA
Collaborator										
12. Builds and promotes interprofessional collaborative relationships.	1	2	3	4	5	6	7	8	9	NA
13. Interacts positively with others.	1	2	3	4	5	6	7	8	9	NA
14. Collaborates with others to support positive client- or work-related outcomes (e.g. for unit, program, health systems).	1	2	3	4	5	6	7	8	9	NA
15. Positively contributes to team interactions (e.g. during staff meeting, family meeting, case conferences, rounds).	1	2	3	4	5	6	7	8	9	NA
Leader										
16. Demonstrates understanding of need for and openness to change or improvement.	1	2	3	4	5	6	7	8	9	NA
17. Acts as a positive role model and mentor.	1	2	3	4	5	6	7	8	9	NA
18. Provides constructive feedback.	1	2	3	4	5	6	7	8	9	NA
19. Listens to and learns from others.	1	2	3	4	5	6	7	8	9	NA
20. Demonstrates insight as to how their behaviour/action impacts others or the work environment.	1	2	3	4	5	6	7	8	9	NA
21. Creates and supports a respectful and emotionally safe practice environment.	1	2	3	4	5	6	7	8	9	NA
22. Considers the organization's culture in decision making.	1	2	3	4	5	6	7	8	9	NA
23. Takes action to support a high-quality practice environment.	1	2	3	4	5	6	7	8	9	NA
Scholar										
24. Uses best evidence to make informed decisions.	1	2	3	4	5	6	7	8	9	NA
25. Translates new information or literature into action in a practical way.	1	2	3	4	5	6	7	8	9	NA
26. Stays current and promotes best practices.	1	2	3	4	5	6	7	8	9	NA
27. I would choose to work with this person on a specific task or project.							<input type="radio"/>	Yes	<input type="radio"/>	No

Unique User ID: XXXX

Unique Password: XXXX

Colleague ID: XXXX

Dear colleague,

Your registered nurse or registered nurse (nurse practitioner) colleague is asking you to provide feedback on their nursing practice by completing an online questionnaire. It is important to your colleague that you take the time to complete the questionnaire.

Please note the following important information:

- The information you provide is anonymous and confidential. You will not need to provide your name or any personal information.
- The RN or RN(NP) will **not** see your individual responses.

The RN or RN(NP) will receive a report based on all the anonymous feedback gathered. The report will help the RN or RN(NP) identify areas of strength in their practice and areas for improvement.

Why are you being asked to complete this questionnaire?

The College of Registered Nurses of Manitoba (CRNM) is responsible for ensuring the public receives safe, competent, and ethical nursing practice. CRNM monitors this through the Continuing Competency Program. Multi-source feedback is a part of this program.

How to complete the questionnaire

The questionnaire should take about 10 minutes to complete online and can be completed via your mobile device, tablet, or desktop computer.

1. Log on to **www.crn202x.com**
2. Enter your unique user ID and password (found at the top of this letter).
3. Read each statement and then rate the RN or RN(NP).

Please complete the online questionnaire by November 30, 202x.

If you have any questions, please contact our team at 204-774-3477 ext 657, or ccp@crnm.mb.ca. Thank you for helping us to ensure Manitobans receive safe, competent registered nursing practice.

Sincerely,

Continuing Competency Program Team
College of Registered Nurses of Manitoba
ccp@crnm.mb.ca
204 774 3477 ext 657



Unique ID:

Unique Password:

Please rate your registered nurse or nurse practitioner on the statements below. Circle the appropriate number in each row. If you are not able to answer questions, please select NA (not applicable). *Ratings should come either from your perspective as the patient or from a family member or substitute decision maker on behalf of the patient being cared for.*

Question	Below Expectations			Met Expectations			Above Expectations				
Clinical											
1. Made me feel my/the patient's opinions matter.	1	2	3	4	5	6	7	8	9	NA	
2. Made me/the patient feel safe in their care.	1	2	3	4	5	6	7	8	9	NA	
3. Explained details about my/the patient's medications.	1	2	3	4	5	6	7	8	9	NA	
4. Helped manage my/the patient's discomfort or pain.	1	2	3	4	5	6	7	8	9	NA	
5. Showed consideration for how I was coping.	1	2	3	4	5	6	7	8	9	NA	
6. Asked me about my concerns and my/the patient's symptoms.	1	2	3	4	5	6	7	8	9	NA	
7. Washed/sanitized their hands before touching me (the patient).	1	2	3	4	5	6	7	8	9	NA	
8. Followed up to see how I/the patient was feeling.	1	2	3	4	5	6	7	8	9	NA	
9. Took into consideration what is important in my/ the patient's life (e.g. spiritual, family, work, independence, religion).	1	2	3	4	5	6	7	8	9	NA	
Professional											
10. Did what they said they would do.	1	2	3	4	5	6	7	8	9	NA	
11. Acted professionally at all times.	1	2	3	4	5	6	7	8	9	NA	
12. Respected my/the patient's privacy and dignity.	1	2	3	4	5	6	7	8	9	NA	
13. Kept the relationship professional.	1	2	3	4	5	6	7	8	9	NA	
Communicator											
14. Introduced self by first and last name and as a registered nurse or nurse practitioner.	1	2	3	4	5	6	7	8	9	NA	
15. Took the time to listen to my/the patient's concerns and questions.	1	2	3	4	5	6	7	8	9	NA	
16. Provided information in a way that I could understand.	1	2	3	4	5	6	7	8	9	NA	
Collaborator											
17. Involved me in the planning of my/the patient's care or treatment.	1	2	3	4	5	6	7	8	9	NA	
18. Helped me connect with other people and/or resources that I/the patient needed.	1	2	3	4	5	6	7	8	9	NA	
19. Offered to involve my family member(s) or support person in making decisions or planning about my/the patient's care or treatment.	1	2	3	4	5	6	7	8	9	NA	
Advocate											
20. Asked my/the patient's permission before starting care or treatment.	1	2	3	4	5	6	7	8	9	NA	
21. Respected my/the patient's decisions.	1	2	3	4	5	6	7	8	9	NA	
22. Explained the benefits and risks of the care provided.	1	2	3	4	5	6	7	8	9	NA	
Educator											
23. Explained care and health issues in a manner that I/the patient could understand.	1	2	3	4	5	6	7	8	9	NA	
24. Asked me what information or education I/the patient needed.	1	2	3	4	5	6	7	8	9	NA	
25. Made sure I/the patient understood the information being provided.	1	2	3	4	5	6	7	8	9	NA	
26. I would recommend this nurse to a family member.							<input type="radio"/> Yes				<input type="radio"/> No
27. I would hope to have this nurse again if I need care.							<input type="radio"/> Yes				<input type="radio"/> No

Unique User ID: XXXX

Unique Password: XXXX

Client ID: XXXX

Dear client,

Your registered nurse (RN) or registered nurse (nurse practitioner) (RN(NP)) is asking you to provide feedback on their nursing practice by completing some questions about their practice. It is important to your nurse that you take the time to complete the questionnaire as it allows them to receive feedback on their communication and professional behavior.

Please note the following important information:

- The information you provide is anonymous and confidential. You will not need to provide your name or any personal information.
- The RN or RN(NP) will **not** see your individual responses.
- Your input is voluntary.

The RN or RN(NP) will receive a report based on all the anonymous feedback gathered. The report will help the RN or RN(NP) to identify areas of strength in their practice and areas for improvement.

Why are you being asked to complete these questions?

The College of Registered Nurses of Manitoba (the College) is responsible for ensuring the public receives safe, competent, and ethical nursing practice. The College monitors this through the Continuing Competency Program and multi-source feedback is a part of this program.

How to complete the form

The form should take about 10 minutes to complete. It can be done online, **or** you can use the enclosed form.

Online

1. Log on to **www.crn202x.com**
2. Enter your unique user ID and password (found at the top of this letter).
3. Read each statement and then rate the RN or RN(NP).

Paper Form

1. Using an ink pen, read each statement and then clearly circle the appropriate rating number.
2. Place the completed form into the self-addressed, postage paid envelope and seal the envelope.
3. **Initial the flap of the envelope.**
4. Either mail the self-addressed envelope or return it to the RN or RN(NP), who will mail the envelope unopened.

Please complete the paper form and have it in the mail by Nov. 24, 202x. Online forms need to be completed by November 30, 202x.

If you have any questions, please contact our team at 204-774-3477 ext 657, or ccp@crnm.mb.ca. Thank you for helping us to ensure Manitobans receive safe, competent registered nursing practice

Sincerely,

Continuing Competency Program Team
College of Registered Nurses of Manitoba
ccp@crnm.mb.ca
204 774 3477 ext 657



Giving feedback on your registered nurse

Your feedback matters. That’s why your registered nurse (RN) or nurse practitioner (RN(NP)) has asked you to complete a questionnaire about the care they provided to you or a family member. Completing the questionnaire lets your RN or RN(NP) know what they’re doing well and what they could do better. Your feedback will be anonymous.

How does it work?



STEP 1

Give your feedback

Complete the questionnaire online or on paper. Instructions are in the envelope your RN or RN(NP) gave you. It will take you about 10 minutes to complete the questionnaire and you can complete it any time before Nov. 15, 2019.



STEP 2

Your RN or RN(NP) learns from your feedback

The feedback you provide is anonymous and confidential. We’ll gather feedback on the RN or RN(NP)’s practice from other patients and your RN or RN(NP) will only see a final report of all the feedback they received.



STEP 3

Better care for patients

Your RN or RN(NP) will use the feedback to identify what they’re doing well and where they can improve. The goal of this feedback is to improve the care they give to their patients.

Need help?

If you need help filling out the questionnaire, you can ask a caregiver, friend or family member to help you. If you need help mailing out the questionnaire, you can ask your RN or RN(NP) to mail it for you after you seal and initial the postage paid envelope.

The College of Registered Nurses of Manitoba is the regulatory body for all registered nurses and nurse practitioners in Manitoba. Together with RNs and RN(NP)s we serve and protect the public interest. For more information about the College, visit crnm.mb.ca.

Contact Us

We're here to support you throughout the entire CCP process.

Please contact us any time at ccp@crnm.mb.ca or 204-774-3477 ext 657