



# **Frequently Asked Questions**

## **Professional Responsibility**

# Overview and Content

In this presentation you will find answers to some of the most frequently asked questions about the process for documenting Professional Responsibility Concerns and resolving them.

Questions include:

- What is the purpose of Professional Responsibility Concerns reporting?
- How are Professional Responsibility Concerns reports different from unusual incident reporting?
- How do Professional Responsibility Committees work?
- What makes a good Professional Responsibility Committee member?
- What is required when discussing Professional Responsibility concerns with managers?

# **What is the purpose of Professional Responsibility Concerns reporting?**

To protect patients/residents/clients from hazards and harm and to assure that the quality of care is acceptable.

To protect RNs, RPNs, LPNs when policies, practices and decisions of their employing organization make it difficult or impossible to provide care that is compliant with the Professional Standards of Practice and the Codes of Ethics of their professional licensing bodies.

# **Where does the legal authority to report Professional Responsibility Concerns come from?**

The Standards of Practice and Code of Ethics of the professional licensing bodies of RNs, RPNs, and LPNs carry legal authority under the Health Professions Act.

Under the Collective Agreements negotiated by the United Nurses of Alberta and Employers of Nurses in Alberta, Nurses are protected when they report concerns about patient/resident/client care including staffing issues.

# **What does the PRC Committee do?**

The structure and process of PRC Committees is specified in the Collective Agreement between UNA and Employers.

The committee is made up of equal numbers of representatives appointed by the Employer and representatives elected by members of the UNA local.

The purpose of the committee is to examine and make recommendations regarding the concerns of employees relative to patient/resident/client care, including staffing.

# **What authority does the PRC Committee have?**

The PRC Committee is required to meet at least once a month at a regularly appointed time.

Written agenda and minutes must be kept.

Information requested must be provided in 30 days.

Issues not resolved by the Committee can be referred to the CEO and if the issue remains unresolved at that level, may be referred to the Governing Board.

The CEO and Board are required to respond in writing within 14 calendar days of the presentation.

# How is a Professional Responsibility Concern reported?

A Professional Responsibility Concern report form has been developed by the United Nurses of Alberta to facilitate documentation of Nurses' concerns.

PRC Report forms are available from the UNA Local and can also be downloaded from UNA Net.

The form is delivered to the UNA Local executive who will discuss it with the Nurse and place it on the agenda of the Professional Responsibility Committee if it has not been resolved by the manager.

# **What are the differences between *unusual incident reporting* and *PRC reporting*?**

A PRC report may contain different information than a report of an unusual incident submitted through Reporting Learning System (RLS) of Alberta Health Services.

The RLS system or equivalent is a policy and procedure of the employing organization and Nurses do not know how or whether their reports are acted upon.

Clause 36 of the Provincial Collective Agreement provides a guarantee to Nurses, patients/residents/clients and the employer that Nurses' PRCs about staffing, equipment or communication will be resolved and if necessary reviewed at the highest level of the organization.



# What are the differences between Professional Responsibility Concern and a Occupational Health issue?

In general, occupational health issues focus on the safety of the nurse and Professional Responsibility Concerns focus on the safety of patients.

In some situations, **both** nurse and patient safety is at issue.

When a situation has both PRC and OH&S dimensions both dimensions will be pursued through the processes outlined in the Collective Agreement.

In some instances, if a PRC with an OH&S component is not successfully resolved as per the Collective Agreement then a meeting needs to take place with the Executives to pursue other options.

# **Why don't Nurses use the AHS Reporting Learning System (RLS) *instead* of PRCs to report their concerns?**

Nurses understand and comply with the requirement to submit reports on the RLS in accordance with the policies of the employer.

Nurses can use the definitions of safety, harm, hazard, and close call in the AHS Policy on the RLS to help them decide when to report a Professional Responsibility Concern.

Many PRC issues are probably also reported on the RLS. However, nurses do not receive direct feedback from this system about how issues are reviewed or resolved.

# **Does the PRC process have any benefit for the employer?**

The corporate mission, vision, and value statements of AHS commit all of its employees and affiliates to patient safety and proper workplace practices. The PRC process supports these values.

The purpose of the PRC Article in the Collective Agreement between Registered Nurses and their employers is to protect Nurses when they are fulfilling their professional roles as advocates for the safety of patients/resident/clients.

The PRC process provides a constructive way for Nurses to advocate for patients.

When Nurses are effective advocates the employer also benefits because patients/residents/clients are protected from hazards, close calls and harm, and the costs and consequences of adverse events are avoided.

# **What if the manager resolves a PRC *before* a Professional Responsibility Concern report form is submitted?**

Managers are often made directly and informally aware of Professional Responsibility Concerns.

In some instances, managers appreciate Nurses' reports of Professional Responsibility Concerns and act on them immediately out of concern for the well being of patients/clients/residents.

# **What should I do if my manager has a pattern of bullying and attempts to prevent me from filling out a Professional Responsibility Concern report?**

Bullying and intimidation are not acceptable behaviours. Managers are in violation of the Collective Agreement if they attempt to prevent or stand in the way of a Nurse documenting a Professional Responsibility Concern for review at the PRC Committee.

Nurses are advised to document violation of this nature, and report them to their Labour Relations Advisor.

# **Do Nurses need to obtain *permission* from a manager before submitting a PRC report?**

No.

It is important that all managers in AHS understand their role in relation to the PRC process.

Intimidation, threats and bullying are never appropriate actions by anyone in the workplace.

These destructive behaviours are particularly inappropriate when Nurses are attempting to bring Professional Responsibility Concerns to managers' attention to prevent hazards, close calls, adverse events, harm or omissions in assessment and care.

# **Are Nurses required to report their issues or concerns to a Manager *before* submitting a PRC Report?**

Clause 36.01 (g) provides a clear answer to this question:

When an issue is specific to one unit or program the employee or Local shall discuss the issue with the immediate supervisor in an excluded management position before the matter is discussed at the Committee.

This clause does not allow the manager to prevent or stand in the way of a Nurse documenting PRCs for presentation to the PRC Committee.

# **What should I do if my manager threatens me or tells me I am not supposed to submit a Professional Responsibility Concern report?**

Unfortunately, some managers ignore or dismiss PRC concerns, or bully or threaten Nurses in direct attempts to prevent them from making Professional Responsibility Concern reports.

This is a violation of the Collective Agreement and should be discussed with a Labour Relations Advisor.

Whether or not they are sympathetic to the Nurse's concern, managers should not attempt to interfere with the negotiated right and professional obligation of Nurses to document their concerns and to have them reviewed and followed up through the PRC process. Education for AHS managers may be required to address this problem.



# **What makes a good PRC Committee member?**

Commitment to the goal of resolving issues

Respectful listening

Information sharing

Constructive problem solving

Willingness to take action

# **Keep the PRC dialog going!**

Do you have a question about Professional Responsibility that is not answered in this document?

Resources are available to assist you and your Professional Responsibility Committee.

Look in FirstClass in Conferences/PRC Conference/PRC Resources.

If your questions are still not answered request consultation from UNA staff.