

# CRNA

College of Registered  
Nurses of Alberta

# Complaint Management Framework

# Table of Contents

Complaint Management Purpose **1**

Framework Principles **1**

Complaint Management Process **2**

Complaint Case Types **3**

# Complaint Management Framework

## Complaint Management Purpose

---

*The purpose of our complaint process is to provide a feedback loop for all Albertans regarding the provision of professional nursing services by all individuals on the register. The information received and obtained during this process is compared to legislation and the CRNA Practice Standards for Registrants to determine what (if any) regulatory intervention is necessary.*

*The complaint process also provides insight to areas of confusion, complexity and challenge in the interpretation and application of the CRNA's expectations.*

---

## Framework Principles

### Case Categorization

The College understands the delivery of health care is complex and scenarios occur for many reasons. Our case assessment addresses a nurse's involvement and classifies the case in one of three types:

- 1. Character**
- 2. Capacity**
- 3. Competence**

### Reasonableness

During the assessment of complaints, the CRNA assesses information provided and compares the behaviour identified to conduct of a reasonably prudent nurse.

### Transparent Objectivity

Complaints received by the College are assessed against transparent policies. Consistent application of these policies ensures equitable process outcomes for all parties, while retaining the ability to apply sanctions where appropriate.

### Balanced Response

Regulatory intervention is used with intent based on the case type and risk of harm to the public. The College's regulatory response is designed to ensure the efficacy of sanctions and decrease rates of recidivism.

### Collaborative Partnerships

The CRNA partners with a variety of collaborators to fulfill our mandate of safe practice for the public. The unique roles of the employer, union, association and regulatory college combine to achieve excellence in nursing practice. We may defer to our partners when the scope of a complaint is not within our mandate.

# Complaint Management Process

Complaints are processed through several steps:

## 1. Complaint Validation & Mandate Review

- Confirm the complaint meets defined thresholds and characteristics
- Confirm the complaint is within the CRNA's mandated jurisdiction
- Escalate response timeline for allegations of sexual abuse or misconduct

## 2. Case Assessment

- Assess the information then assign a case type

### 3.1 Immediate Resolution

- An immediate decision may be made by the CRNA based on the case assessment

### 3.2 Expedited Alternate Resolution

- Gain alignment between parties through arbitration and negotiation

### 3.3 Complex Investigations

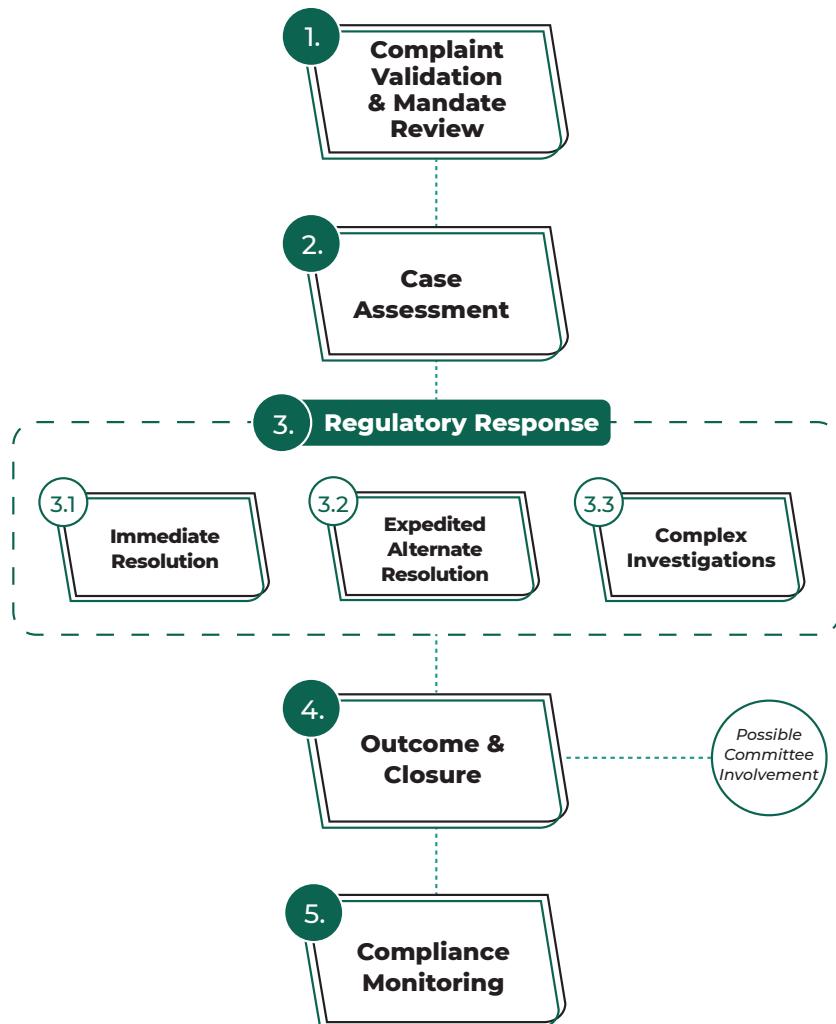
- Gather and compile further evidence when an immediate or expedited resolution is not possible

## 4. Outcome & Closure

- Decision made by the Complaints Director
- All parties are notified of the outcome

## 5. Compliance Monitoring

- Confirm sanctions are completed or met as assigned



*Decisions made by the CRNA may be appealed by either the complainant or the registrant involved. In this scenario, a regulatory committee would be convened.*

# Complaint Case Types

Case Type	Category	Subcategory
<b>1. Character</b>  <b>Registrant Assessment:</b> Demeanour, behaviour and intent  <b>Threshold Measurement:</b> Registrant behaviour and decisions that negatively impact good character, reputation & integrity of the profession.	<b>Sexual Abuse/ Misconduct</b>	<b>1.1</b> Sexual Abuse - Patient <b>1.2</b> Sexual Abuse - Public <b>1.3</b> Sexual Abuse - Coworker <b>1.4</b> Sexual Misconduct - Patient <b>1.5</b> Sexual Misconduct - Public <b>1.6</b> Sexual Misconduct - Coworker
	<b>Co-worker Abuse/ Harassment</b>	<b>1.7</b> Co-worker Abuse/Harassment
	<b>Patient Abuse</b>	<b>1.8</b> Patient Abuse <b>1.9</b> Contravention of Criminal Code
	<b>Boundary</b>	<b>1.10</b> Professional Boundaries
	<b>Theft</b>	<b>1.11</b> Workplace Theft & Fraud (stealing, concealing, drug diversion) <b>1.12</b> Misrepresentation (unlicensed activity, impersonation, use of title, advertising)
<b>Regulatory Response: Character</b> <ul style="list-style-type: none"> <li>If validated with evidence, the regulatory response to this case type is appropriate disciplinary sanctions.</li> </ul>		
<b>2. Capacity</b>  <b>Registrant Assessment:</b> Impairment and/or incapacity  <b>Threshold Measurement:</b> Registrant fitness to practise limitations affected by mental health and/or addictions.	<b>Fitness to Practise</b>	<b>2.1</b> Fitness to Practise
	<b>Substance Misuse</b>	<b>2.2</b> Substance Misuse
<b>Regulatory Response: Capacity</b> <ul style="list-style-type: none"> <li>If validated with evidence, the regulatory response to this case type will include interim agreements (to restrict or remove practice) and focus on rehabilitation plans.</li> <li>At times, cases in this category may also result in the discovery of evidence in another case category. If this occurs, both case types will be validated.</li> </ul>		
<b>3. Competence</b>  <b>Registrant Assessment:</b> Knowledge, skills and abilities  <b>Threshold Measurement:</b> Registrant alignment with the Standards of Practice expectations during the provision of professional services.	<b>Skills/Practice/ Knowledge</b>	<b>3.1</b> Skills/Practice/Knowledge
	<b>Privacy</b>	<b>3.2</b> Information & Privacy <b>3.3</b> Nurse Practitioner Scope of Practice
	<b>Attendance/ Employer Matters</b>	<b>3.4</b> Attendance/Employer Matters
	<b>Other</b>	<b>3.5</b> Other
<b>Regulatory Response: Competence</b> <ul style="list-style-type: none"> <li>If validated with evidence, the regulatory response to this case type will focus on education, addressing knowledge gaps and learning. Outcomes will vary based on the attributes of the case.</li> </ul>		