
Quality Assurance Program for Regulator Performance
Established under the *Regulated Health Professions Act, 2023*
Results of Pilot

A pilot of the Quality Assurance Program for Regulator Performance (QAPRP) assessment was conducted by the Department of Health & Wellness (DHW) from June 1, 2024, to October 31, 2024. The pilot included 6 health profession regulators under DHW oversight, who were each assessed for their compliance with good governance practices, based on a series of standards and expected outcomes. For any areas of non-compliance, a common deadline has been set by which time each pilot regulator must complete the necessary work for compliance. All other health profession regulators under DHW oversight will be assessed under the QAPRP by winter 2026.

The following Nova Scotia health profession regulators participated in the QAPRP pilot program:

Midwifery Regulatory Council of Nova Scotia (MRCNS)

Nova Scotia College of Nursing (NSCN)

Nova Scotia College of Dispensing Opticians (NSCDO)

Nova Scotia College of Optometrists (NSCO)

Nova Scotia College of Pharmacists (NSCP)

College of Physicians & Surgeons of Nova Scotia (CPSNS)

QAPRP Pilot Regulator Results Summary

DOMAIN: GENERAL		COMPLIANCE	
STANDARD	EXPECTED OUTCOME	TOTAL	DEADLINE
Regulator maintains accurate and accessible information that is publicly available	Information about registrants is displayed accurately and clearly in an easily accessible manner on regulator's website.	6 of 6	N/A
	Information about the regulator's governing board and statutory committees, including the names of the respective members, are displayed on regulator's website	6 of 6	N/A
	Information on how the public can make a complaint and the investigation processes is publicly available on the regulator's website.	6 of 6	N/A
	Information posted on a regulator's website is presented in a plain language format.	5 of 6	March 2026
	All bylaws are published and made available to the public and registrants in an easily accessible format on regulator's website	6 of 6	N/A
Regulator demonstrates the principles of EDIRA	Regulator has a position statement that reflects the principles of EDIRA which is publicly available and easily accessible on the regulator's website.	3 of 6	September 2025
	Regulator has a code of conduct on how it operates for staff and committee members).	5 of 6	March 2025
	Regulator demonstrates commitment to diversity and inclusion reflected in board, committee, and staff composition.	4 of 6	September 2025
DOMAIN: GOVERNANCE		COMPLIANCE	
STANDARD	EXPECTED OUTCOME	TOTAL	DEADLINE
Regulator's governing board governs according to governance best practices	Board has a governance model/structure and follows governance best practices.	6 of 6	N/A
	Board members participate in an orientation to governance best practices.	6 of 6	N/A
	Policies/procedures for the board are provided to board members and staff	6 of 6	N/A
	Processes for review of standards are documented.	3 of 6	September 2025

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	Policies and/or standards have measurable outcomes. Policies have a review schedule and evaluation process		3 of 6	September 2025
	Board has and undertakes a self-evaluation process.		3 of 6	September 2025
	Regulator has a risk management framework, and policies and/or processes are in place to address risks		4 of 6	March 2026
	Implementation of appropriate board and board committee structures or processes		6 of 6	N/A
	The regulator demonstrates adherence to a code of conduct, conflict of interest, and confidentiality policies.		6 of 6	N/A
	Regulator articulates a vision and strategic directions for the organization.		3 of 6	May 2025
Regulator’s governing board has appropriate oversight of operations	Board monitors progress in meeting the strategic directions and adherence to policies		3 of 6	September 2025
	Regulator’s operations are compliant with applicable federal and provincial laws, and its governing legislation.		5 of 6	September 2025
Board and statutory committee members have the knowledge, skills, and commitment needed to effectively execute their fiduciary role and responsibilities pertaining to the regulator’s mandate.	Board identifies and communicates eligibility and suitability criteria for registrants to stand for election/appointment to the board and statutory committees.		5 of 6	September 2025
	Board and statutory committee candidates, once appointed, are trained about the regulatory mandate and expectations pertaining to their roles and responsibilities.		6 of 6	N/A
	Training is ongoing (at least annually) for board and committee members		5 of 6	September 2025
DOMAIN: STANDARDS INCLUDING POLICIES & GUIDELINES			COMPLIANCE	
STANDARD	EXPECTED OUTCOME		TOTAL	DEADLINE
Regulator maintains up-to-date standards that are regularly reviewed and prioritize	Standards are reflective of current practice environment and consideration is given to collaborative practice teams and cultural competence.		6 of 6	N/A
	Feedback from registrants and impacted parties about standards and policies is gathered and incorporated into revisions.		4 of 6	September 2025

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patient/client centered care and safety.	An evaluation strategy is in place.	1 of 6	September 2025
Regulator provides guidance to assist registrants to interpret and apply the standards and addresses new and developing areas of risk in practice.	Regulator communicates with academic programs to promote awareness of standards and inform the development/revision of standards.	4 of 6	September 2025
	Registrants are informed about revisions to standards and new standards.	6 of 6	N/A
	A communication strategy is in place to inform registrants about expectations pertaining to standards, policies, renewal, and registration requirements	4 of 6	March 2025
DOMAIN: INVESTIGATIONS, PROFESSIONAL CONDUCT, and FITNESS TO PRACTICE			COMPLIANCE
STANDARD	EXPECTED OUTCOME	TOTAL	DEADLINE
Regulator enables anyone to raise a concern about a registrant.	Different stages of the complaints and fitness to practice processes are clearly communicated and set out on the regulator's website.	2 of 6	March 2025
	Information is communicated directly to complainants and respondents who are engaged in the complaints process	4 of 6	September 2025
	Relevant supports available to complainants and respondents are clearly and directly communicated.	3 of 6	September 2025
Regulator's processes for examining and investigating complaints is fair, transparent, and timely.	Regulator is compliant with applicable legislation pertaining to the professional conduct and fitness to practice processes	5 of 6	September 2025
	Policies and procedures are developed that define processes and timelines that meet legislative requirements.	2 of 6	September 2025
	Process clearly written and publicly accessible.	2 of 6	September 2025
Regulator's decisions are consistent, fair, and prioritize public protection mandate.	Decisions and the evidence supporting each decision at each stage of the process are well documented.	5 of 6	March 2025
	Decisions reflect regulator's consideration of: (decisions on website) The regulator's statutory objectives,	6 of 6	N/A

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	The regulator's practice standards, and relevant case law		
	Discipline decisions are reported in a timely manner in accordance with legislation and are posted publicly.	6 of 6	N/A
Regulator implements interim orders in cases where there is a risk to public safety.	Process for interim orders is documented in policies and procedures.	3 of 6	September 2025
	The regulatory has an established process to identify and prioritize high-risk cases	3 of 6	September 2025
	Interim orders are reported on the regulator's website	6 of 6	N/A
The regulatory supports all parties during the complaint process.	Process for communication to all parties is documented in policies and procedures: when, how, and frequency of communication to all parties.	2 of 6	September 2025
	Timelines are communicated to all parties and parties are kept informed on the progress of their case.	1 of 6	September 2025
DOMAIN: INFORMATION MANAGEMENT		COMPLIANCE	
STANDARD	EXPECTED OUTCOME	TOTAL	DEADLINE
Information collected by the regulator is protected from unauthorized disclosure.	Regulator has developed and implemented policies and processes that govern the collection, use, disclosure, and protection of information.	3 of 6	March 2026
	Regulator has developed and implemented policies and processes that govern the destruction of records.	3 of 6	March 2026
DOMAIN: SUITABILITY TO PRACTICE/CONTINUING COMPETENCE		COMPLIANCE	
STANDARD	EXPECTED OUTCOME	TOTAL	DEADLINE
Regulator ensures the continued competence of all active registrants.	Regulator has a continuing competence program that is developed and implemented that supports competency, professionalism, ethical practice, and quality of care.	6 of 6	N/A
Regulator has processes and procedures in place to assess	Processes and procedures are developed and implemented that outline:(1) How areas of practice that are evaluated are identified. (2) How a right touch evidence informed approach has been used to identify which registrants will undergo an assessment activity.	4 of 6	September 2025
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the competency, safety, and ethics of the people it registers	(3) Criteria used to identify remediation activities a registrant must undergo based on the practice review assessment, where necessary.		
DOMAIN: EDUCATION		COMPLIANCE	
STANDARD	EXPECTED OUTCOME	TOTAL	DEADLINE
Regulator has a transparent mechanism for assuring that the education programs it authorizes meet regulator’s requirements.	Regulator has established standards to those programs accepted by the board to assess the quality of education programs.	4 of 6	March 2025
	Regulator has an established process to assess the quality of education programs (e.g., accreditation).	4 of 6	March 2025
DOMAIN: MEASUREMENT, REPORTING, and IMPROVEMENT		COMPLIANCE	
STANDARD	EXPECTED OUTCOME	TOTAL	DEADLINE
Regulator monitors, reports on, and improves its performance.	Regulator’s key performance indicators (KPI’s) are developed, including a clear rationale for why each is important.	2 of 6	March 2026
	Board uses performance and risk information to regularly assess the regulator’s progress against stated strategic objectives and regulatory outcomes.	4 of 6	March 2026
	Where relevant, performance and risk review findings are translated into improvement activities	4 of 6	July 2026