




## OVERVIEW OF THE REGULATED HEALTH PROFESSIONS ACT


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### *The Regulated Health Professions Act*

- The Act received royal assent June 2009
- Portions of the RHPA were proclaimed effective June 1, 2011
- Established the Health Professions Advisory Council to provide advice to the Minister
- Enables unregulated health professions to apply to be regulated




### *The Regulated Health Professions Act*

- The RHPA replaces the current 21 statutes for 22 health professions and will bring all regulated health professions under one act
- The RHPA changes the way health professions in Manitoba are regulated



### *The Regulated Health Professions Act*


- Each profession will continue to be self-governing
- Key difference is the RHPA sets out a list of reserved acts, consistent rules and processes for governance, registration, complaints, discipline processes and regulation and by-law making authority



### *The Regulated Health Professions Act*

Key objectives reflected in the RHPA:


1. Allow professions to be self-regulating
2. Continue to place the interests of the public and patient/client safety at the centre of the regulatory process



### *The Regulated Health Professions Act*

Key objectives (continued):


3. More effective public protection by regulating actions or clinical procedures that may present risk or harm
4. Reduce barriers to inter-professional practice
5. Foster greater confidence in the provincial health care system.

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### **RHPA Proclamation**

Proclamation

- The RHPA was proclaimed into force on January 1, 2014
- The first 2 health professions Audiology and Speech-Language Pathology also transitioned to the RHPA on Jan 1<sup>st</sup>
- The LGIC Regulation and the Council Regulation set out the requirements for the profession

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### **LGIC Regulation**

- The LGIC regulation is profession specific
- Sets out:
  - Scope of Practice Statement
  - Authorized reserved acts
  - Transitional Provisions
- The Profession Specific Act is repealed when the profession transitions to the RHPA

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### **Council Regulations**


**Council Regulations will set out:**

- Registers, membership classes and titles
- Requirements for certificate of practice
- Limits and conditions on the performance of reserved acts
- Delegation
- Standards of practice
- Continuing competency program requirements
- Health profession corporation requirements

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### **Reserved Acts**

- New shared scope of practice/reserved act regulatory model similar to that in Ontario, British Columbia and Alberta
- Based on the concept of controlling potentially harmful “reserved acts”
- 21 categories of acts that can pose a significant risk of harm or possible harm are restricted to regulated health professionals.

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### **Reserved Acts**

- Reserved acts to be authorized for a profession based on current scope of practice
- Council Regulations sets out qualifications, requirements and conditions
- Council Regulations may authorize delegation or supervision

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### **Code of Ethics Standards of Practice**


The RHPA requires the Council of a College to:

- adopt a **code of ethics** governing the conduct of the members of the College
- Establish by regulation **standards of practice**
- Councils are also empowered to issue **practice directions** in respect of the practice of the profession

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### ***Continuing Competence Program***

- Council must establish a continuing competency program to maintain the competence of the members and to enhance the practice
- Program may include:
  - ✓ Reviewing professional competence
  - ✓ Requiring members to participate in competency programs
  - ✓ Conducting practice audits

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### ***Current Status***

- In June 2013 the Legislative Unit at Manitoba Health established a team to advance the Health Professions Regulatory Initiative (HPRI)
- One of the priorities is the work associated with the RN regulations and transitioning the RN profession under the RHPA
- Similarly work is progressing with the College of Physician and Surgeons of Manitoba

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### ***The Regulated Health Professions Act***

**THANK YOU**