



Nurses and
Nurse Practitioners
of British Columbia

RN Certified Practice Decision Support Tools (DST) Stewardship Plan

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Preamble

Registered Nurses in the Province of British Columbia (BC) are autonomous, self-regulating care providers whose practice is governed by multiple pieces of legislation and a regulatory framework. The [Health Professions Act](#) sets out in statute how Registered Nurses licensed to practice in BC can engage in caring for patients and the public. Section 19(1)(k) of this Act establishes regulatory authority including the establishment of standards, limits, and conditions for Registered Nursing practice in BC by the BC College of Nurses and Midwives (BCCNM).

Further to this legislation, the [Nurses \(Registered\) and Nurse Practitioners Regulation](#) empower BCCNM to regulate the practice of Registered Nurses to protect the public and ensure nurses provide competent ethical care that meets expected standards of practice. Section 8 mandates the oversight of “certified practices”, noting that Registered Nurses who meet the regulatory criteria for certified practice may engage in an expanded scope of practice. This expanded scope includes the performance of activities otherwise restricted for Registered Nurses including the diagnosis and treatment of some diseases and disorders and the autonomous practice of some restricted activities that might otherwise require an order.

NNPBC stewards three areas of Certified Practice, as identified by BCCNM. These three areas are:

- **Reproductive Health: Contraceptive Management**
- **Remote Nursing**
- **RN First Call**

The conditions for certified practice include the completion of a BCCNM-approved certification program in the area of specific certification, achievement of certified practice competencies, and the use of provincially established Decision Support Tools (DSTs) to guide certified practice. DSTs set out the scope of practice for Registered Nurses engaged in certified practice and are therefore critically important to both enabling the protection of the public and supporting certified Registered Nurses in providing safe, ethical care.

Historically, the DSTs and competencies were stewarded by the BCCNM. In 2020, stewardship of these important tools was transferred to the Association of Nurses and Nurse Practitioners of British Columbia (NNPBC). In 2023, BCCNM announced the new Certified Practice – Opioid Use Disorder, which is stewarded by the BC Centre on Substance Use (BCCSU). In 2024, NNPBC migrated stewardship of Reproductive Health: Sexually Transmitted Infections to the BC Centre for Disease Control (BCCDC). NNPBC holds responsibility for ensuring the DSTs under NNPBC stewardship as well as the unified competencies for certified RN and RPN practice are current, accessible, evidence-informed, and sufficiently archived to support legal requirements. BCCNM retains critical responsibilities in relation to certified practice, including identifying and communicating the regulatory framework underpinning certified practice; recognition of certified practice education and training programs; and pursuing complaints and discipline regarding the practice of individual Registered Nurses engaged in certified practice.

To enable our DST stewardship responsibilities, NNPBC has set out in this **RN Certified Practice DST Stewardship Plan** as our approach to managing the DST inventory and Certified Practice Competencies. This includes a governance framework with clear roles and responsibilities, definitions, approaches for evidence integration, and a framework engaging subject matter experts in areas of certified practice. This plan is grounded in NNPBC’s ongoing commitment to partnership with BCCNM, post-secondary institutions providing certified practice training, and other key organizations across BC that are engaged in supporting and enabling RN certified practice. Additionally, this plan centres our commitment to ensuring all nurses in BC have access to the tools they need to provide culturally safe care.

NNPBC maintains stewardship over the jointly adopted competencies for RN Certified Practice in BC as well as competencies for Registered Psychiatric Nurse Opioid Use Disorder (OUD) in collaboration with the named agencies for certified practice stewardship, including the BC Center for Substance Use (BCCSU), the BC Center for Disease Control (BCCDC), and BCCNM ([Appendix A](#)).

Definitions

Endorsement means the status granted to the DST Oversight Body to act as the decision-making body for DST revision and renewal, so granted when a DST meets the standards set by the approved processes laid out in the DST Stewardship Plan.

Certified Practice means the restricted activities that are subject to regulatory provisions under Section 8 of the Nurses (Registered) and Nurse Practitioners Regulation of the *Health Professions Act*, carried out by Registered Nurses

who have met the conditions of certified practice and been approved by BCCNM to be designated as certified Registered Nurses or RN(c) in one of the three certified practice areas set out by BCCNM.

Oversight Body means the responsibility of NNPBC and BCCNM to ensure existing and revised DSTs have met the standards set by the approved process laid out in the DST Stewardship Plan.

Competencies mean statements set out in writing and accessible to all certified Registered Nurses and partners outlining the knowledge, skills, attitudes, and judgment required to perform within a circumscribed scope of practice safely and ethically.

Decision Making means the formalized ways in which decisions are made within the structure set out in the NNPBC RN Certified Practice DST Stewardship Plan, including but not limited to decisions related to membership in these structures, knowledge supporting DST creation and revision, decisions to recommend DST assets, and final approval of DSTs.

Decision Support Tools means the evidence-informed assets stewarded by NNPBC and created with partners identified in the RN Certified Practice DST Stewardship Plan, which are available to all certified Registered Nurses in BC as well as the public and whose versions are archived with NNPBC and BCCNM to support legal requirements.

Evidence means the knowledge informing the DSTs, including research evidence, grey literature, practice evidence, and subject matter expertise.

Governance means how NNPBC structures the oversight of the DSTs and sets out transparently how decisions related to DST stewardship will be made.

Recommendation means the decision by the Subject Matter Expert Advisory Group to advance a DST to the DST Oversight Body for endorsement and publication or the suggestions arising from NNPBC Professional Practice staff in secretariat functions.

Registered Nurse means those individuals approved by BCCNM to use the title Registered Nurse and who practice within the standards and scope of practice set out for Registered Nurses in BC.

Restricted Activities means activities set out in the Nurses (Registered) and Nurse Practitioners Regulation of the *Health Professions Act* as restricted activities and for which specific legislative authority is required.

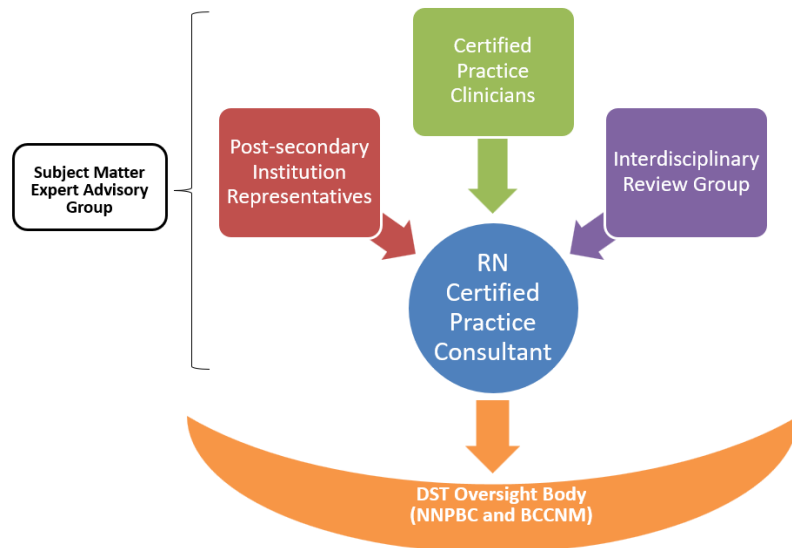
Subject Matter Expert Advisory Group means post-secondary institution representatives, certified practice registered nurse representatives and interdisciplinary review groups to support the currency, accuracy, and relevance of the DST inventory.

Governance

A three-part governance structure supports stewardship of the DSTs. This structure is comprised of the following:

- Subject Matter Expert Advisory Groups
- Oversight Body: NNPBC and BCCNM
- RN Certified Practice Consultant(s)

These three parts align to ensure that the DSTs supporting RN-certified practice are evidence-informed, current, accessible, and transparently reviewed and renewed.



Subject Matter Expert Advisory Groups

The Subject Matter Expert Advisory Groups are led by an RN Certified Practice Consultant, who serves as a contractor to NNPBC. The RN Certified Practice Consultant has clinical expertise in a certified practice stream (Reproductive Health, RN First Call, or Remote Nursing) relevant to the work of DST stewardship and is responsible for leading DST revisions within their respective certified practice stream. The RN Certified Practice Consultant, supported by NNPBC's Professional Practice team, works collaboratively with the three primary stakeholder groups that represent the Subject Matter Expert Advisory groups:

- 1) Post-Secondary Institutions (2)
- 2) Certified Practice Clinicians in each Certified Practice stream (maximum 3 per stream for a total of 9)
- 3) Interdisciplinary review group including but not limited to physicians, nurse practitioners, provincial centres of excellence (e.g. BCCDC), regional professional practice representatives, and pharmacy.

The RN Certified Practice Consultant provides subject matter expertise to guide the development, review, and revision of DSTs based on consultation provided by the Subject Matter Expert Advisory Groups as per NNPBC's approach to DST lifecycle management. The RN Certified Practice Consultant is supported by the Manager, Professional Practice, Education & Research at NNPBC.

Oversight Body

NNPBC

The NNPBC Professional Practice team serves as the coordinating arm of NNPBC for DST stewardship. The Professional Practice team provides secretariat functions for DST stewardship, including coordinating the flow of information within the governance structure; setting and facilitating all DST-related meetings; supporting the RN Certified Practice Consultant(s); completing evidence reviews and evidence synthesis; executing DST lifecycle management; publishing DSTs on publicly accessible platforms such as the NNPBC website; and responding to questions from certified practice RNs and the public on DST-related issues. NNPBC Professional Practice also escalates issues related to DST stewardship through NNPBC leadership as required and maintains the DST SharePoint.

The Manager, Professional Practice, Education & Research is the NNPBC responsible leader for DST stewardship and ensures the DST-related work of the Professional Practice team is completed to the expected standards of NNPBC and our partners. The Manager is the NNPBC support person for the RN Certified Practice Consultant(s). The Manager supports the RN Certified Practice Consultant(s) by coordinating meetings with the Subject Matter Expert Advisory Groups, ensuring the consistent integration of evidence into DSTs, and supporting the RN Certified Practice Consultant(s) in implementing DST changes.

BCCNM

BCCNM serves as the second arm of the DST Oversight Body for final decision-making for DST lifecycle management. BCCNM representatives work in collaboration with NNPBC to ensure DST revisions align with regulatory requirements as set out by the legislation, regulation, and professional standards, and provide final endorsement for DST review, renewal, publication or retirement. BCCNM also support the dissemination of information related to certified practice via the certified practice nurse registry.

Oversight

NNPBC and BCCNM will receive DSTs for review as directed by the RN Certified Practice Consultant. The Manager, Practice, Education, and Research is the NNPBC individual designated to provide DSTs oversight for NNPBC. BCCNM may appoint 1-2 representatives to serve as part of the oversight body. BCCNM representatives may provide approval of the DST via email communications to the Manager, Practice, Education and Research. Alternatively, the BCCNM representative(s) may request a virtual meeting to discuss the DSTs with the Manager, Practice, Education and Research and the RN Certified Practice Consultant prior to final publication. Virtual meetings will be arranged upon request, on an as-needed basis. Both NNPBC and BCCNM representatives are required to review all DSTs and support publication prior to revised DSTs coming into effect.

DST Lifecycle Management

The DSTs form a critical part of both controls on and standards for nursing practice in BC. Ensuring the DSTs are current, evidence-informed, accessible, and transparently revised is a priority for NNPBC. To ensure we meet this priority, NNPBC stewards the DSTs using a policy instrument lifecycle management approach ([Appendix B](#)).

1. DST Creation

The existing DST inventory represents the entirety of the DST inventory currently available to support certified RN practice in BC. Future legislative and regulatory changes may require the creation of additional DSTs. Should a new DST be required, the following steps guide DST creation:

- 1.1 All requests or requirements for new DSTs go to NNPBC Professional Practice.
- 1.2 NNPBC Professional Practice, in collaboration with BCCNM and the Subject Matter Expert Groups will consider the need and feasibility of creating a net new DST. Should a net new DST be required, the NNPBC Professional Practice team will notify the RN Certified Practice Consultant of the respective stream.
- 1.3 NNPBC Professional Practice will initiate an evidence review to support the RN Certified Practice Consultant to assess the current state of evidence on the DST area of focus.
- 1.4 In collaboration with NNPBC's Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will lead the drafting of a net new DST (DST Version 1).
- 1.5 In collaboration with Manager, Professional Practice, Education & Research the RN Certified Practice Consultant will consult the Subject Matter Expert Advisory Groups in sequential order. The RN Certified Practice Consultant is responsible for determining when sufficient review and consultation has been received from each arm of the Subject Matter Expert Advisory Groups and will lead revisions throughout the creation process.
- 1.6 NNPBC Professional Practice will be responsible for tracking revisions and providing technical and administrative support to the RN Certified Practice Consultant throughout the revision process.
- 1.7 In collaboration with the NNPBC Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will provide the representatives of the respective post-secondary institution DST Version 1a for review and consultation. The RN Certified Practice Consultant will integrate revisions provided by the post-secondary representatives including evidence obtained from curricular documents (DST Version 2a).

- 1.8 In collaboration with the NNPBC Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will disseminate DST Version 2a to the Certified Practice Clinicians within the respective Certified Practice stream for review and consultation. The RN Certified Practice Consultant will integrate revisions provided by the Certified Practice Clinicians (DST Version 2b).
- 1.9 In collaboration with the NNPBC Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will disseminate DST Version 2b to the interdisciplinary review group. The RN Certified Practice Consultant will integrate revisions provided by the Interdisciplinary Review Group (DST Version 2c).
- 1.10 NNPBC Professional Practice will post DST Version 2c for public consultation. The RN Certified Practice Consultant in collaboration with NNPBC Manager, Professional Practice, Education & Research, will integrate revisions provided from public consultation (DST Version 3).
- 1.11 Should the RN Certified Practice Consultant determine that the DST is ready for publication, the RN Certified Practice Consultant will notify the Manager, Professional Practice, Education & Research to escalate the DST to the Oversight Body for final review and endorsement.
- 1.12 If the Oversight Body determines that changes are needed, the draft DST Version 3 will be sent to the RN Certified Practice Consultant for additional changes.
- 1.13 If endorsed, NNPBC Professional Practice will publish the net new DST on the NNPBC website and through the NNPBC Certified Practice distribution list. NNPBC will also provide both a PDF of the new DST and a communication announcement to BCCNM for dissemination to all members of the RN-certified practice registry and education partners of BCCNM-approved certification programs. The Subject Matter Expert Advisory Group will also receive notification upon publication of the net new DST.

2. Regular DST Review and Revision

All DSTs stewarded by NNPBC will be reviewed in full once every three (3) years. A schedule of DST reviews will be held by NNPBC to ensure transparency on when and how each DST is updated and revised. The DST review schedule serves as a timed activity ensuring that DSTs are current, and evidence-informed ([Appendix C](#)).

The following steps guide regular DST review and revision:

- 2.1 NNPBC Professional Practice shall be responsible for maintaining the DST review schedule and shall initiate DST reviews according to the review schedule.
- 2.2 NNPBC Professional Practice will notify the respective RN Certified Practice Consultant of upcoming DST reviews and revisions in each area of certified practice in January of each calendar year. Not all RN Certified Practice Consultants will have scheduled reviews and revisions annually. Such reviews shall be dependent on the existing DST asset inventory and the established DST review schedule.
- 2.3 NNPBC Professional Practice will initiate an evidence review to support the RN Certified Practice Consultant to assess the current state of evidence on the DST area of focus.
- 2.4 In collaboration with the NNPBC Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will lead the drafting of initial DST revisions based on the evidence synthesis provided (DST Version 1).
- 2.5 In collaboration with the NNPBC Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will consult the Subject Matter Expert Advisory Group in sequential order. The RN Certified Practice Consultant is responsible for determining when sufficient review and consultation has been received from each arm of the Subject Matter Expert Advisory Group and will lead revisions throughout the creation process.
- 2.6 NNPBC Professional Practice will be responsible for tracking revisions and providing technical and administrative support to the RN Certified Practice Consultant throughout the revision process.
- 2.7 In collaboration with the NNPBC Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will provide the representatives of the respective post-secondary institution DST Version 1a for review and consultation. The RN Certified Practice Consultant will integrate revisions provided by the post-secondary representatives, including evidence obtained from curricular documents (DST Version 2a).
- 2.8 In collaboration with NNPBC Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will disseminate DST Version 2a to the Certified Practice Clinicians within the respective Certified

Practice stream for review and consultation. The RN Certified Practice Consultant will integrate revisions provided by the Certified Practice Clinicians (DST Version 2b).

- 2.9 In collaboration with the NNPBC Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will disseminate DST Version 2b to the Interdisciplinary Review Group. The RN Certified Practice Consultant will integrate revisions provided by the Interdisciplinary Review Group (DST Version 2c).
- 2.10 NNPBC Professional Practice will post DST Version 2c for public consultation. The RN Certified Practice Consultant in collaboration with NNPBC Manager, Professional Practice, Education & Research, will integrate revisions provided from public consultation (DST Version 3).
- 2.11 Should the RN Certified Practice Consultant determine that the DST is ready for publication, the RN Certified Practice Consultant will notify NNPBC Manager, Professional Practice, Education & Research to escalate the DST to the Oversight Body for final review and endorsement.
- 2.12 If the Oversight Body determines that additional changes are needed, the draft DST will be sent to the RN Certified Practice Consultant for additional changes.
- 2.13 If endorsed, NNPBC Professional Practice will publish the revised DST on the NNPBC website and via the NNPBC certified practice distribution list. In addition, NNPBC will provide both a PDF of the new DST and a communication announcement to BCCNM for dissemination to all members of the RN certified practice registry and education partners of BCCNM-approved certification programs. The Subject Matter Expert Advisory Group will also receive notification upon publication of the revised DST.

3. DST Revision Outside of the DST Review Schedule

There may be instances when revision to a DST falls outside of the standard DST review schedule. Such a change may be prompted by changes to evidence, legislation, or regulation.

When a DST revision is required outside of the DST review schedule, NNPBC will aim to achieve revision within 30 days of identifying that a revision is required. The following steps will guide DST revision:

- 3.1 NNPBC Professional Practice will notify the RN Certified Practice Consultant that a revision to a specific DST is required. NNPBC Professional Practice will call a special review meeting with the RN Certified Practice Consultant to support rapid DST review and revision.
- 3.2 NNPBC Professional Practice will initiate a rapid evidence review and synthesis related to the required DST revision and provide it to the appropriate RN Certified Practice Consultant.
- 3.3 In collaboration with the NNPBC Manager, Professional Practice, Education & Research, the RN Certified Practice Consultant will lead the drafting of initial DST revisions based on the evidence synthesis provided (DST Version 1).
- 3.4 The RN Certified Practice Consultant will lead the rapid revision and shortened consultation with the Subject Matter Expert Advisory Group (Version 2a, 2b, 2c as required).
- 3.5 NNPBC Professional Practice will be responsible for tracking revisions and providing technical and administrative support to the RN Certified Practice Consultant throughout the revision process.
- 3.6 When the applicable RN Certified Practice Consultant determines that the DST revision is complete, NNPBC Professional Practice will call a special meeting with the DST Oversight Body to provide a final endorsement.
- 3.7 If endorsed, NNPBC Professional Practice will publish the revised DST on the NNPBC website and via the NNPBC certified practice distribution list. In addition, NNPBC will provide both a PDF of the new DST and a communication announcement to BCCNM for dissemination to all members of the RN certified practice registry and education partners of BCCNM-approved certification programs. The Subject Matter Expert Advisory Group will also receive notification upon publication of the revised DST.
- 3.8 NNPBC Professional Practice will determine if the rapid review was sufficiently comprehensive to constitute a full review. If the rapid review was sufficient, NNPBC Professional Practice will revise the DST review schedule to reflect a new scheduled review date. If the rapid review is not sufficiently comprehensive to replace a full, scheduled review, NNPBC Professional Practice will note the rapid revision in the schedule without shifting the regularly scheduled review.

4. DST Evaluation

DSTs outline the scope of practice for Registered Nurses engaged in certified practice in BC. As such, it is critical that the DST inventory be evidence-informed, current, accurate, and practice-appropriate. Evaluation of these tools is therefore a critical part of managing these assets.

The following steps will guide DST evaluation:

- 4.1 NNPBC will provide a publicly-facing feedback channel that is available to nurses in BC at all times. NNPBC Professional Practice will ensure feedback received through this channel is responded to in a timely manner if the feedback is technical such as broken links or grammatical corrections. Feedback beyond that of a technical nature will be escalated to the DST Oversight Body for consideration as appropriate.
- 4.2 NNPBC will develop a DST evaluation framework and an engagement strategy to support evaluation, including engagement with DST users, employers of Registered Nurses engaged in certified practice, and other key stakeholders to evaluate the DSTs both broadly and individually.
- 4.3 Following the publication of revised DSTs, NNPBC Professional Practice will undertake a targeted evaluation of those DSTs that have been recently revised to ensure the revised DSTs are meeting clinical practice needs and supporting excellence in nursing practice.
- 4.4 The DST Subject Matter Expert Advisory Group and Oversight Body may request additional evaluation of DST-related activities and assets. However, NNPBC Professional Practice will balance such requests against other priorities and communicate if additional evaluation can be undertaken at the time of request.

5. DST Retirement

Not all DSTs are required in perpetuity. From time to time, a DST may be retired from the active inventory. The following steps guide DST retirement:

- 5.1 NNPBC Professional Practice will provide the RN Certified Practice Consultant, members of the Subject Matter Expert Advisory Group and BCCNM with the opportunity to consider the retirement of a DST in January of each year when regularly scheduled DSTs are up for revision. The RN Certified Practice Consultant will support and lead this annual review.
- 5.2 Any members part of NNPBC DST Stewardship may at any time bring forward a request to retire a DST. Such requests will be first assessed by the RN Certified Practice Consultant in collaboration with the Subject Matter Expert Advisory Group and then escalated to the DST Oversight Body with a recommendation on whether a DST should or should not be retired.
- 5.3 The DST Oversight Body will hold decision-making authority on the retirement of a DST. The DST Oversight Body may request additional information, engagement, and support to determine the appropriateness of retiring a DST.
- 5.4 Should the Oversight Body endorse the retirement of a DST, BCCNM and NNPBC will communicate this to registrants/members and partners through existing channels. BCCNM will retain responsibility for communicating to Registered Nurses engaged in certified practice any changes to the scope of practice or practice implications resulting from the retirement of a DST.
- 5.5 NNPBC will retain all versions of the retired DST in the DST archive for seven (7) years. Thereafter, NNPBC will retain only the version of the retired DST available at the time it was retired.

6. DST Archives

Access to DSTs at different points in time supports the assessment of nursing practice concerns and complaints. In particular, assessment of meeting or failing to meet practice standards relies on access to the standards of practice published and supporting practice at the time of an incident occurring. It is therefore important that DST version control is well managed throughout the lifecycle and that previous versions of DSTs are archived for easy access in the future.

The following steps will guide DST archiving:

- 6.1 NNPBC will retain an archive of DSTs from March 2020 forward that will serve as the single source of truth for the DST inventory post-migration.
- 6.2 DST versions will be archived for seven (7) years.

- 6.3 Requests for archived DSTs received by NNPBC Professional Practice will be provided within fourteen (14) days of NNPBC Professional Practice receiving the request.
- 6.4 NNPBC Professional Practice will remove from the DST archive versions retired for more than seven (7) years. NNPBC will provide BCCNM with the intention to remove DSTs from the archive thirty (30) days prior to removal.
- 6.5 BCCNM will also retain archived DSTs and continue to maintain the BCCNM archiving system, to be able to respond to requests from the BCCNM Inquiry, Discipline and Monitoring department for historical DSTs. NNPBC Professional Practice will support these requests as a partner to BCCNM as appropriate.

Resources

- [Health Professions Act](#)
- [Nurses \(Registered\) and Nurse Practitioner Regulation](#)
- [Ministry of Health Information for Registered Nurses \(Certified\)](#)
- [BCCNM Certified Practice](#)
- [BCCNM Education Program Review Policies](#)
- [UNBC Remote Nursing Certified Practice Program](#)
- [UNBC RN First Call Certified Practice Program](#)
- [BCIT + Options Reproductive Health Certified Practice Program](#)
- [NNPBC DSTs and Competencies](#)
- [NNPBC DST Change Request Form](#)
- [BC Centre for Substance Use Opioid Use Disorder Resources](#)
- [BC Centre for Disease Control STI Resources](#)
- [BC Centre for Disease Control STI DSTs](#)

Appendix A

Competencies

NNPBC maintains stewardship over the jointly adopted competencies for Certified Practice in BC. These Competencies are jointly adopted by named agencies for Certified Practice Stewardship, including BCCSU and BCCDC.

NNPBC regularly reviews competencies using a policy instrument lifecycle management approach to maintain consistency and congruency with the DST lifecycle management cadence. Competency creation, revision, and retirement may occur outside of this cadence in response to changes in legislation, regulation, practice and education.

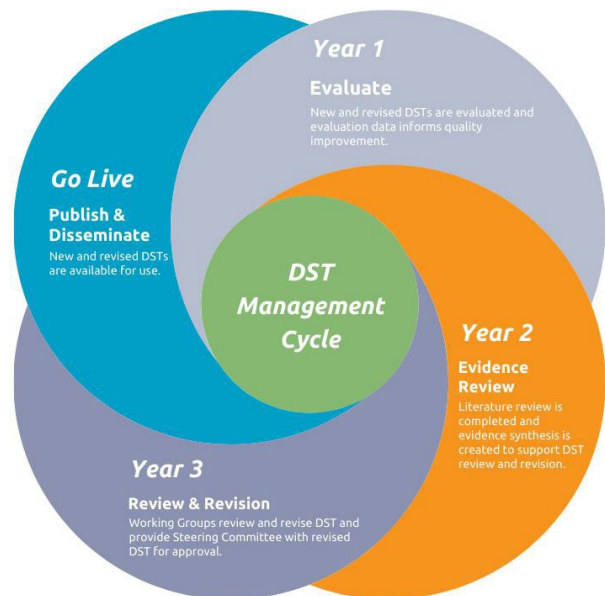
The NNPBC Stewardship plan governs the revision, evidence incorporation, retirement, and archiving of Competencies for all Certified Practices. NNPBC works collaboratively with named Certified Practice agencies, including BCCSU and BCCDC, to create, revise, and retire Certified Practice Competencies as they relate to specific Certified Practice streams. NNPBC and named Certified Practice agencies will convene bi-annually to discuss DST and Competency Stewardship.

When Competencies are created, revised, or retired, NNPBC will strike working groups or related committees to inform the provincial Competencies for all Certified Practices. Named Certified Practice agencies, BCCSU and BCCDC, will partner in related working groups or committees related to Certified Practice Competencies.

Appendix B

Life Cycle Management

The DSTs form a critical part of both controls on and standards for nursing practice in BC. Ensuring the DSTs are current, evidence-informed, accessible, and transparently revised is a priority for NNPBC. To ensure we meet this priority, NNPBC stewards the DSTs using a policy instrument lifecycle management approach. The following figure provides an overview of the DST stewardship life-cycle management approach for standard scheduled reviews of the DST inventory.



Appendix C

DST Review Process

All DSTs stewarded by NNPBC will be reviewed in full once every three (3) years. A schedule of DST reviews will be held by NNPBC to ensure transparency on when and how each DST is updated and revised. The DST review schedule serves as a timed activity, ensuring that DSTs are current, and evidence-informed. The following diagram provides an overview of the DST stewardship process.

