

*Registered Psychiatric Nurses,
Partnering with People*

RPN

**REGISTERED
PSYCHIATRIC
NURSES
ASSOCIATION OF
SASKATCHEWAN**

2013

Annual Report

3 Mission

The Distinct Profession of Psychiatric Nursing is a valued partner in the continuum of health care with competent members who promote and support mental health, hope and recovery.

3 Vision

The mission of the Registered Psychiatric Nurses Association of Saskatchewan is to provide Saskatchewan People with competent psychiatric nursing.

The mission involves the achievement of the following ends:

1. Ensuring the supply of competent Registered Psychiatric Nurses
 2. Protecting the public through regulation
 3. Continual development of a body of knowledge
 4. Developing practice opportunities
5. Advocating for quality integrated mental health services and policy

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2014 RPNAS Annual General Meeting & Education Day



Renewal Rejuvenation Revitalization

Hosted at:

Regina DoubleTree by Hilton
1975 Broad Street
Regina, SK S4P 1Y2

Discounted Room Rate:

\$159/night Parking Included
Booking Code: PSA
To Book: (306) 525-6767
Limited Availability



Day One – June 5th, 2014

| | |
|---------------------|-----------------------------|
| 11:00 AM - 12:00 PM | Registration |
| 12:00 PM - 12:15 PM | Welcome & Introductions |
| 12:15 PM - 2:00 PM | Dr. Joyce Mikal Flynn |
| 2:00 PM - 2:15 PM | Coffee Break |
| 2:15 PM - 4:00 PM | Dr. Mikal Flynn Continued |
| 4:00 PM - 5:45 PM | Break |
| 5:45 PM - 6:30 PM | Social (cash bar available) |
| 6:30 PM - 7:30 PM | President's Award Banquet |
| 7:30 PM - End | Award Presentations |

Day Two – June 6th, 2014

| | |
|---------------------|--------------------------|
| 8:00 AM - 9:00 AM | Registration & Breakfast |
| 9:00 AM - 10:30 AM | CARE Panel |
| 10:30 AM - 10:45 AM | Coffee Break |
| 10:45 AM - 12:00 PM | CARE Panel Continued |
| 12:00 PM - 1:00 PM | Lunch |
| 1:00 PM - End | Annual General Meeting |

Register today by visiting <http://www.rpnas.com/agm>

Bylaw III - Meetings of the Association Section 4 - Voting Eligibility to vote at a meeting of the association shall be determined by presentation of a current practicing membership card.

Statement of Purpose of Annual Meeting

In June 1984, the RPNAS Council passed a statement focusing the purposes of the Annual Meeting. These purposes are:

1. To provide a forum for the dissemination of information from Council to the membership;
2. To provide a vehicle for the membership to give guidance to Council through adoption of resolutions/motions; and
3. To afford an opportunity for members to raise issues of concern through an "Open Forum."

The agenda for the Annual Meeting has been prepared following legislated requirements and these purposes. The call for submissions of new business via the Open Forum was published in the Spring 2009 issue of the *RPNNews*. The guidelines for the Open Forum allow for questions and new business arising from the floor. Time limits for discussion will be at the discretion of the Chair.

Rules of Order for Annual Meetings of the RPNAS

The President, or in his/her absence or at his/her request, a Chairperson shall preside over the Annual Meeting.

SUBJECT OF DISCUSSION

No question of a sectarian character shall be discussed at meetings.

RECOGNITION

When a member wishes to speak, he/she shall be recognized by the Chairperson, and shall give his/her name and the branch he/she represents, and shall confine his/her remarks to the question at issue.

CONDUCT OF MEETING PARTICIPANTS

A member shall not interrupt another except it be to call a point of order. If a member is called to order, he/she shall at the request of the Chairperson, take his/her seat until the question of order has been decided.

Should a member persist in unparliamentary conduct, the Chairperson will be compelled to name him/her and submit his/her conduct to the judgment of the meeting. In such cases the member whose conduct is in question should explain and then withdraw, and the meeting will determine what course to pursue in the matter.

MOTIONS

All motions arising from the floor shall be written in duplicate and signed by the mover and seconder before being presented. Discussion will not commence until this process is complete.

DEBATE

Members who wish to speak to a question or make a motion shall use the microphone, address the Chairperson and give their name and position.

No member may speak more than once to the same question unless all others who wish to speak have done so. If the mover of the motion speaks a second time, debate shall be closed.

Time for debate may be extended by a two-thirds (2/3) vote of the members.

When a motion to Close Debate is made, no discussion or amendment of either motion is permitted. If the majority vote that the "questions now put" the original motion has to be put without debate. If the motion to put the question is defeated, discussion will continue of the original motion.

CALLING THE QUESTION

When a question is put, the Chairperson, after announcing the question, asks "Are you ready for the question?" If no member wishes to speak, the question will be put..

Questions may be decided by a show of hands, or a standing vote, but a roll call vote may be demanded by 30 per cent of the members present. In a roll call vote, each member shall be entitled to one vote.

A call for a vote on the question ("Call to Question") requires a formal motion and approval by two-thirds (2/3) vote of the members.

APPEAL

The member may appeal the decision of the Chairperson. The Chairperson shall then put the question thus "Shall the decision of the Chair be sustained?" The question shall not be debatable, except that the Chairperson may make an explanation of his/her decision.

RECONSIDERATION OF A MOTION

A motion may be reconsidered provided that the mover of the motion to reconsider voted with the majority, and notice of motion is given for consideration at the next meeting, and said notice of motion is supported by two-thirds (2/3) of the members qualified to vote.

AUTHORITY

In all matters not regulated by these rules of order, Robert's Rules of Order shall govern.

OBSERVERS

Observers may, at the call of the Chairperson, be invited to comment or ask questions on a particular issue once discussion by membership has been completed.

CLARIFICATION REGARDING ABSTENTIONS

The basic rule is that a motion requiring a majority vote is adopted if more members vote in favour of the motion than vote in opposition. Members who are entitled to vote but who abstain are not counted when determining a majority. In effect, they have relinquished their right to be a factor in the decision. (It is possible for example, to have 30 members in attendance at a meeting and when the votes are counted discover that there are seven votes in favour and five opposed. The motion would be adopted because a majority of those voting were in favour of the motion.)



Pictured Above (Left to Right): Louise Burrridge, Don Froese, Christina Chernick, Brenda Francis, Pam Watt, Shirley Bedford, Marion Palidwor.

RPNAS Council 2013-2014

RPNAS Staff

Executive Director

Robert Allen, PRN, North Battleford

Registrar

Candace Alston, RPN, Regina

Office Administrator

Kim Clory

Marketing Communications

Mike Clory



President

Marion Palidwor, RRN, North Battleford

President Elect

Sydney Bolt, RPN, Regina

Members-at-Large

Shirley Bedford, RPN, North Battleford

Christina Chernick, RPN, Regina

Brenda Francis, RPN, Saskatoon

Don Froese, RPN, Saskatoon

Tamara Quine, RPN, Regina

Pam Watt, RPN, Saskatoon

Public Representative

Louise Burrridge



President's Report

Since the last president's report in the 2012 Annual Report, penned by former president Shirley Bedford, there are new developments and some initiatives that have yet to make their first baby steps.

The Province of Saskatchewan has realized a Degree Program for Psychiatric Nurses and the first intake was in September 24, 2013 with 15 seats. As well a second stream provided 10 seats in January of 2014 for those of us who have been out of school for several years, prior to 2010. The RPNAS has been faithful at every opportunity to request an enhancement in the number of seats available for all psychiatric nurse training. Our profession is the one profession that has the oldest members with the ability to retire at any time, therefore creating a major shortage of psychiatric nurses for the province. The RPNAS has also never forgotten about the Registered Psychiatric Nurse Practitioner. This is not yet a reality but the RPNAS sees it as a much needed professional for the Province of Saskatchewan, especially in the difficult recruitment areas.

The Province of Saskatchewan has decided to finally put forth a Mental Health Strategy by appointing Dr. Fern Stockdale Winder to speak with stake holders about mental health and how best to move forward with a focus on the "patient first" concept. The RPNAS Council met with Dr. Stockdale Winder on one of her initial consultations, and to answer Council to answer any questions she had posed. We will be working with Saskatchewan Union of Nurses after their meeting with the Commissioner to ensure the message we are trying to get across to her is congruent. Our hope is that the Mental Health Strategy envisioned is based on "patient" need and not wholly based on the province's economics. The RPNAS is looking for a comprehensive mental health strategy that will take the province's people well into the future with evidence-based high quality mental health care.

Nationally, the RPNC is working hard to make it possible for Registered Psychiatric Nurses to work across the country. Currently RPNs are only available in the four Western Provinces, Yukon, North West Territories and Nunavut.

RPNC has also been instrumental in getting a sizeable Federal Government grant to update the current RPN entry level competencies. This work should be completed by the fall of 2014 and will become a useful tool to educate employers as to what we, as RPNs, can really do!

The RPNC will be reincorporating as a national non-profit corporation to comply with the new Federal Legislation. The annual meeting of the RPNC is in June 2014.

Locally, the RPNAS now has a scope of practice document online. This is currently undergoing review but was needed now to demonstrate the scope of RPNs practice and assist employers when looking at their hiring practices and staffing needs. This document is available on the RPNAS website at <http://www.rpnas.com/scope/>.

On May 11, 2013 the North Battleford Branch of the RPNAS had its 4th annual "Champions of Mental Health" Awards Banquet. The RPNAS purchased a table at the event and many council members and staff enjoyed the evening. The North Battleford Branch presented five (5) awards: two in the category of Mental Health Staff, one in the category of Supportive Employer, one in the

category of Community Based Mental Health Organization and one in the category of Mental Health Volunteer. There was also a special award that evening. This award was offered to a Registered Psychiatric Nurse who has nursed actively for the past 40 plus years, had been involved with the RPNAS when it was know as the SPNA in several capacities, and had served and continues to serve on the Council of the RPNAS. This award was a surprise to the recipient, Shirley Bedford, which was presented to her by Robert Allen on behalf of the organizing committee. The evening was started off with a supremely delicious meal and was ended with a hilariously funny one act play put on by local actors from Cochin. The organizing committee also had a silent auction going on as well, with the proceeds ear-marked for the Battleford Education and Trade Center Inc building fund.

On June 7, 2013 the RPNAS held its Education Day/AGM in Saskatoon at the Park Town. The guest speaker was Dr. Alec Couros from the University of Regina. He spoke on the topic of Social Media and its application in healthcare.

Two weeks later the RPNAS Council met in Moose Jaw for our Retreat/Council Meeting. The first day is set aside for education on governance. We did not have a significant change over in council members unfamiliar with our governance style so instead we went through the entire Executive Director policies, made changes as required.

On October 22, 2013 a new concept was introduced to the family of nursing. The three nursing regulators became partners in an educational opportunity. This educational day was held in Saskatoon and was well attended by all. The largest group was from SALPN, second largest group was from SRNA and the RPNAS member attendance was the smallest group. The day was put together to build relationships between all the nursing groups. The guest speaker was Jeff MacInnis. He is a world explorer and has led a very exciting, diverse life. The examples of his trek across the North Pole on a catamaran with a small crew was awe inspiring, the amount of positive thinking it must of took to complete such a dangerous trek is mind numbing. The message I took away from this day is that "anything can be accomplished by working together".

In November, the RPNAS Council met with Saskatchewan Union of Nurses Board to discuss issues we could work on together to further the needs of RPNs. The meeting ended on a positive note in which the RPNAS Council came up with several issues being endured by our members in the workplace and



Ruth Reschke-McKay: Champions of Mental Health Award Winner.

Photo Courtesy of Battleford News-Optimist/Regional Optimist

ways in which both of us could work in conjunction with one another to better the outcomes for RPNs. This is still a work in progress and the RPNAS Council will continue to work with SUN when and where applicable in the years to come.

This past year has been a whirlwind of activity locally and nationally in many areas but still to the detriment of longer-stay patients, the Government of Saskatchewan, has not broken ground in the development of the new Saskatchewan Hospital in North Battleford. There has been work done behind the scenes with P3 planning and the creation of mock units and other service areas for the new facility, but I for one am certainly not impressed with the speed this project is inching along at. The Saskatchewan Government has been reported to have 2.5 million dollars ear-marked for this long needed facility in this budget year. Many parties seem to be pleased with that amount, however the longer it takes to break ground, the more the facility will cost to build. Not only will the cost in dollars increase but also in the cost to the dignity of mental health clients currently in the facility and those that will come to the facility in the future.

It has also been reported that the Saskatchewan Government has come up with a strategy to recruit and retain nurses into rural and remote areas of the province. This strategy had been a joint effort between the Saskatchewan Association of Nurse Practitioners, the Saskatchewan Union of Nurses, the Saskatchewan Registered Nurses Association and finally the Saskatchewan Government. There is nothing wrong with the principle of the strategy except that the RPNAS has also been asking for the ability to have a stream in our education that would be comparable to the current RN (NP), our own RPN (NP). We have met with resistance to this idea from the Chief Nursing Advisor, Lynn Digny-Davis and if the idea can't get past her then we do not have an equal representation when it comes to a voice with the Government of Saskatchewan. The RPNAS has made suggestions to the Commissioner for the Mental Health Strategy to have another position at this level that is an RPN so our voice can also be heard.

Most of us go along in our lives not giving much thought to what goes on around us as it relates to our profession. I was one of those people about 12 years ago. I was happily immersed in my work, family, friends, and extra curricular activities. I had not given much thought to what was going on within the RPNAS, whether decisions made at Council impacted my profession or not. Since I have been involved with the Council of the RPNAS I understand the very hard work being done by the Executive Director, his staff and the Council. It seems that at every turn there is someone or something coming up that will either enhance our profession or try to erode it to non-existence. I personally wish to thank the Council, Robert Allen (Ex. Director) and RPNAS staff for your dedication to the profession of Psychiatric Nursing and the people of Saskatchewan. I encourage all members to take an interest in what is happening with our profession by filling in surveys when sent to you, by using the RPNAS website and giving your opinions on the "members only section" about issues that you experience in your work life and how you feel these issues can be resolved, put your name forward to serve on the Council or President -Elect, resurrect your Branch structure to hold information sharing evenings or have an "event" that can be worked on to promote understanding of mental health /illness, and by attending the RPNAS Annual Meetings. The ways in which you can participate in your profession are numerous, you simply have to participate! The RPNAS needs your thoughts, opinions and constructive criticism about what we are doing, the directions we are going and where we should be headed.

Respectfully submitted,



Marion Palidwor, RPN
President



Executive Director's Report

I am pleased to present the annual report for the association for the 2013 year. The operating year for the association was changed from the fiscal year to the calendar year therefore the annual financial reports will no longer reflect deferred revenues and the title will be reflective of the full calendar year preceding the report. Council has spent considerable time on the review and development of ends and policies in keeping with their responsibilities, and following the policy governance established to ensure excellence in governance. The ends are established to guide the Executive Director in the administration of the organization while following the executive limitations policies established by Council. The primary duties of the Executive Director are based on the established ends and governed by Executive Limitations and Governance Policies. I am pleased to report that the past year was one of many enhancements and changes as well as the usual challenges faced by small regulatory bodies in a fast paced health care environment. The established ends of the association are as follows:

END 1 Global Ends

The Registered Psychiatric Nurses Association of Saskatchewan is a valued partner in the continuum of health care with competent members who promote and support mental health, hope and recovery at a use of resources that demonstrates good stewardship of member fees.

The mission of the Registered Psychiatric Nurses Association of Saskatchewan is to provide Saskatchewan people with competent psychiatric nursing.

The mission involves the achievement of the following ends:

1. Ensuring competent Registered Psychiatric nurses
2. Protecting the public through regulation
3. Continual development of a body of knowledge
4. Developing practice opportunities
5. Advocating for quality integrated mental health services and policy

Ends 1 and 2 are Council's highest priority.

There were six complaints against members received and investigated in 2013. These complaints are still currently under investigation. No disciplinary hearings were held. One 2012 complaint remained under appeal at Provincial court and will fall under the 2014 reporting period.

Regulatory processes are undergoing major changes with the use of technology and better practices. The RPNAS Registrar played a significant role inter-provincially and nationally as the National Nursing Assessment Service was conceived and developed into an incorporated organization. The NNAS will ensure international nurses will be assessed through one portal and

will streamline the application process as well as provide fairness and consistency in how applications are handled.

The national project undertaken by the Registered Psychiatric Nurses of Canada is well underway and the outcome will be a new agreed upon set of entry level competencies for RPNs. The question of mobility for RPNs will be reviewed and a series of consultations will occur.

The new Degree Completion Program at SIAST is underway, with graduates from the diploma program enrolled as well as those who graduated prior to 2010. The degree completion program will undergo a summative evaluation process in due course and we will be looking for qualified reviewers at that time.

The RPNAS continues to support an increase in diploma level seats and would like at least 30 seats added to the program. This is currently a high demand program at SIAST.

We continue to lobby for an integrated mental health system and are participating fully in the review by Dr. Fern Stockdale Winder. The RPNAS has tabled a report and competency profile for the RPNP (Registered Psychiatric Nurse Practitioner), and has participated in consultations with Government. We are hopeful of the development of public policy which will see integration of mental health within the human services systems in the province.

The association consults with stakeholders and provides a resource to government in the area of mental health. We maintain membership/involvement and an active role in numerous organizations such as:

- CMHA (Canadian Mental Health Association)
- NIRD (Network of Inter-professional Regulatory Organizations)
- Provincial Nursing Council
- RPN Education Advisory Committee (SIAST)
- The University of Regina Senate
- The University of Saskatchewan Senate
- SRNA, SALPN, SASW
- RPNC (Registered Psychiatric Nurses of Canada)
- Collaborative Nursing Group
- Northern Economic Development nursing Advisory Committee (NECC)
- Saskatchewan Mental Health Coalition
- NNAS (National Nursing Assessment Service)
- CNNAR (Canadian Network of National Association Regulators)
- Attendance at the annual meetings and conferences and education days of other organizations such as SUN, CMHA, Quality Council, Saskatchewan Legal Association, SRNA, SALPN.

Nationally the organization was represented at meetings and events of the CPA (Canadian Psychiatric Association), C N A (Canadian Nurses Association), CIHI (Canadian Institute of Health Information), CNNAR (Canadian Network of National Association Regulators).

END 2 Competent Registered Psychiatric Nurses and Graduate Psychiatric Nurses

The End “Competent RPNs and GPNs” is interpreted to include, but not limited to:

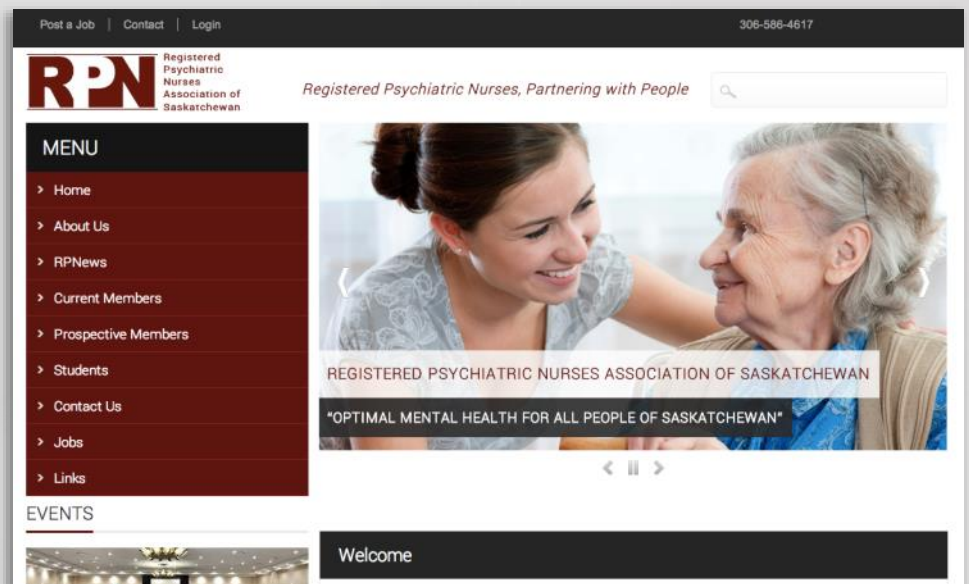
1. Education programs in place that ensure graduates meet beginning practitioner competencies.
2. RPNs adhere to Standards of Practice and Code of Ethics.
 - 2.1 RPNs working in independent practice comply with the standards set out in the document Guidelines for Registered Psychiatric Nurses in Independent Practice.
3. A credible measure of competence.
 - 3.1 Advanced education and ongoing licensure.
4. Criteria for registration and ongoing licensure.

The new National exam for registration (the RPNCE) is delivered through ASI (Assessment Strategies Incorporated) and regular sittings of the exam are conducted three times a year. We are confident of the high quality and consistency of this process.

The Code of Ethics and Standards of practice documents undergo regular review. We are pleased with developments in a set of national standards for the review of education programs.

The continuing professional development process is under review. Currently a percentage of membership is audited on an annual basis. A portfolio system is in place for those members that wish to use it. Credits are required as a condition for licence renewal.

The new RPNAS website has a member list which can be used by anyone wishing to see if someone is currently registered.



Visit our new website at <http://www.rpnas.com>.

END 3 Public Policy that Promotes/Supports Optimal Mental Health.

The End “Public Policy that Promotes/Supports Optimal Mental Health” is interpreted to include but not limited to:

1. RPNAS is a competent, reliable resource for public and other agencies.
2. Government consults with RPNAS as a credible source when forming mental health policy.
 - 2.1 RPNs in Saskatchewan lobby on issues related to optimal mental health.
3. Public research funds are allotted to mental health.
 - 3.1 RPNs are consulted/involved in carrying out research.
4. Public policy is in place that prioritizes safety for vulnerable individuals and caregivers.

The review and action plan for mental health created an opportunity for input and consultation on issues of public policy regarding

mental health.

Initiatives from the Canadian Mental Health Commission are being well received and many are being implemented in Saskatchewan.

END 4 Psychiatric Nursing is a Self-Regulated Profession

The End "Psychiatric Nursing is a Self-Regulated Profession" is interpreted to include but not limited to:

1. Members understand and support self-regulation.
2. Public and members receive fair and just hearing of concerns.
3. Public participation in the regulation process.
4. Members have pride in their profession.

The RPNAS has a process in place to ensure stakeholder involvement in Council meetings and consults broadly. A public member sits on the RPNAS Council.

Statutory committees are in place to deal with complaints and member discipline.

Policy Governance guides the work of council, with consistent attention to potential for conflict of interest and unethical conduct.

The profession is promoted with marketing and events designed to further education and professional pride. This will be a priority area of our work in 2014 and beyond, as we seek to demonstrate and promote the value added by RPNs to patient centred and wholistic care.

END 5 Mental Health is a valued and integral part of the Health System

The End "Mental Health is a valued and integral part of the Health System" is interpreted to include but is not limited to:

1. Public receives competent mental health care
2. RPNs are valued partners in a quality health care system.
 - 2.1 RPNs teach other service providers concerning mental health.
 - 2.2 There is an adequate supply of RPNs in Saskatchewan.
 - 2.3 RPNs have equal opportunity for career advancement and mobility.
3. Public and human service providers recognize registered psychiatric nursing as a distinct profession.

One of our greatest challenges has been to create awareness of the distinct profession of psychiatric nursing and having to compete for the resources required to maintain a sufficient number of members to offset the number of members that will retire. Canadian Institute of Health Information (CIHI) reports show that we are the oldest nursing workforce in Canada and these reports demonstrate the need for action.

RPNs constitute the largest group of regulated professionals providing mental health services in western Canada.

END 6 Public Knowledge and Awareness of Mental Health Literacy

The End “Public Knowledge and Awareness of Mental Health Literacy” is interpreted to include but not limited to:

1. Comprehension of mental health as not merely the absence of mental illness
2. Human service providers have an understanding of mental health literacy.
3. Social inclusion
4. Recovery

* We have defined mental health literacy as the knowledge and skills that enable people to access, understand and apply information for mental health. (CAMIMH)

There is a long way to go in increasing awareness and the approach of partnering with other organizations and individuals provides a means of doing so. Collaboration with other stakeholders increases resources and delivers more effective results.

We have continued to collaborate and promote awareness of mental health and mental illness, and the need for increased attention to education.

END 7 A distinct and Vibrant Professional Identity

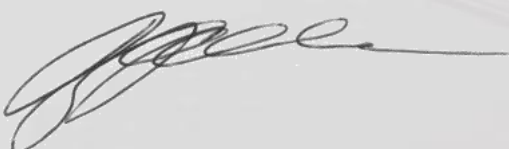
The End “A Distinct and Vibrant Professional Identity” is interpreted to include but is not limited to:

1. Engaging membership
 - 1.1 networking
2. Celebrating professional pride
 - 2.1 Sharing accomplishments
 - 2.2 Acknowledging successes
 - 2.3 Role modelling professional pride
3. Maintaining and developing internal and external communication and marketing strategies

The RPNAS has a new website with new features and is embracing technology to further our stated end of “A Distinct and Vibrant Professional Identity.”

The increased use of technology promises better communication and information sharing which will help to increase member involvement and pride.

Respectfully Submitted,



Robert Allen, RPN
Executive Director



Registrar's Report

The regulatory function of the Registered Psychiatric Nurses Association of Saskatchewan is to ensure that our members deliver safe, competent and ethical care to the citizens of Saskatchewan. In order to do this our members must comply with legislation, standards of practice, a code of ethics and registration processes. I would like to ask our members to insure that the information provided to us at renewal time is an accurate representation of their current situation and reflects their highest level of academic achievement. Canadian Institute of Health Information (CIHI) uses this information to produce their reports. Big thanks to Kim and Mike for their hard work during renewal season and beyond.

I would like to congratulate the 2013 graduating class of the Psychiatric Nursing program and welcome them to the profession. You have worked hard to complete your program, pass the national examination and are now working as Registered Psychiatric Nurses throughout the province. You have done well!

As Practice Consultant my responsibilities include supporting members in their practice by assisting them to understand and apply the Code of Ethics and Standards of Practice As well as collaborating with employers to assist them to define the RPN role as it relates to our competencies. The RPNAS alone and with our regulatory colleagues continue to work on projects that will assist in collaborative practice.

In the capacity privacy officer my responsibilities are to insure that our organization is in compliance with privacy legislation and ensure that our members are in compliance with the Health Information Protection Act (HIPA).

INTERNAL COMMITTEES

Education Committee

It is my responsibility to provide staff support to this committee by organizing the annual review of CPD audits, following up on any committee recommendations as well as presenting scholarship and bursary applications to the committee.

Education Approval Committee

This committee provides guidelines for the review of the Psychiatric Nursing Programs within the province. The Council has asked that this committee provide them with a document relating to the RPN Scope of Practice.

Nominations Committee

The responsibilities of this committee are to seek RPN's to are interested in running for RPNAS Council and oversee the election process. Our Council positions for this year were filled by acclamation. I would encourage our members to consider running for Council.

RPN-P Committee

This Council committee has been asked to explore all areas of advanced practice and also assist the education approval committee to develop the Scope of Practice document.

EXTERNAL COMMITTEES

Network of Inter-Provincial Regulatory Organizations (NIRO)

This group is made up of members of the 26 regulated health professions in Saskatchewan. They meet twice a year to discuss issues common to all and participate in an educational opportunity. Our May meeting consisted of an education session in which the provincial health regulators received Kaizen Basic Training.

Mental Health Coalition

This is an interprovincial committee consisting of over 150 agencies, groups, citizens who have a common goal of advocating for a better quality of life for those who live with mental illness members. This year the focus is on improving the system to allow for stakeholder engagement and to enhance the continuum of care in Saskatchewan. Member agencies were asked to make presentations to the Mental Health Commissioner for Saskatchewan as part of a report that will inform a Mental Health and Addictions Strategy for Saskatchewan.

Orientation to Nursing in Canada for Internationally Educated Nurses – Program Advisory Committee – SIAST

This committee meets annually to provide a link between SIAST and the various sectors that they serve. They provide advice and guidance to assist in determining program quality, relevance and currency.

NATIONAL ORGANIZATIONS

Registered Psychiatric Nurses of Canada (RPNC)

This group consists of the Presidents and Executive Directors from each province in which Psychiatric Nurses are regulated. They meet annually to discuss matters of national concern. The working committees of this group are the Executive Directors Resource Group (ERDG) and the Inter Provincial Group (IPG).

Inter Provincial Group (IPG)

This group meets quarterly in conjunction with the meetings held by the ERDG. The discussion at these meetings relate to common practice concerns, the Mutual Endorsement Agreement and other issues that may have inter-jurisdictional implications.

Assessment Services Incorporated (ASI) – Registered Psychiatric Nurses of Canada Examination Advisory Committee

This committee consists of two representatives from each jurisdiction. The mandate is to approve test materials at critical points in the test development cycle, to resolve issues and problems related to the work of item writers groups and to report to the Client Advisory Group.

Canadian Institute of Health Information (CIHI)

Our organization along with our inter-provincial colleagues continue to assist this group to ensure that the information gathered about our profession is accurate and complete. In addition to attending the annual meeting with CIHI my current role is to participate as part of the Nursing Database Dictionary working group. This group consists of 2 members of each regulatory group. Its purpose is to review dictionary of information collected for submission to CIHI.

National Nursing Assessment Service (NNAS)

This non-profit corporation established to co-ordinate a consistent national approach to the assessment of internationally educated nurses' eligibility for licensure by Canadian nursing regulators. As part of the Change Management team my role is to act as a liaison between the NNAS and the regulatory organization to facilitate the transition. This service will be operational by mid-August.

RPNC Mobility Project

RPNAS has two representatives on the Project Management Committee.

Respectfully submitted,



Candace Alston RPN

Registrar



Member Statistics

5 Year Comparison of Active Members

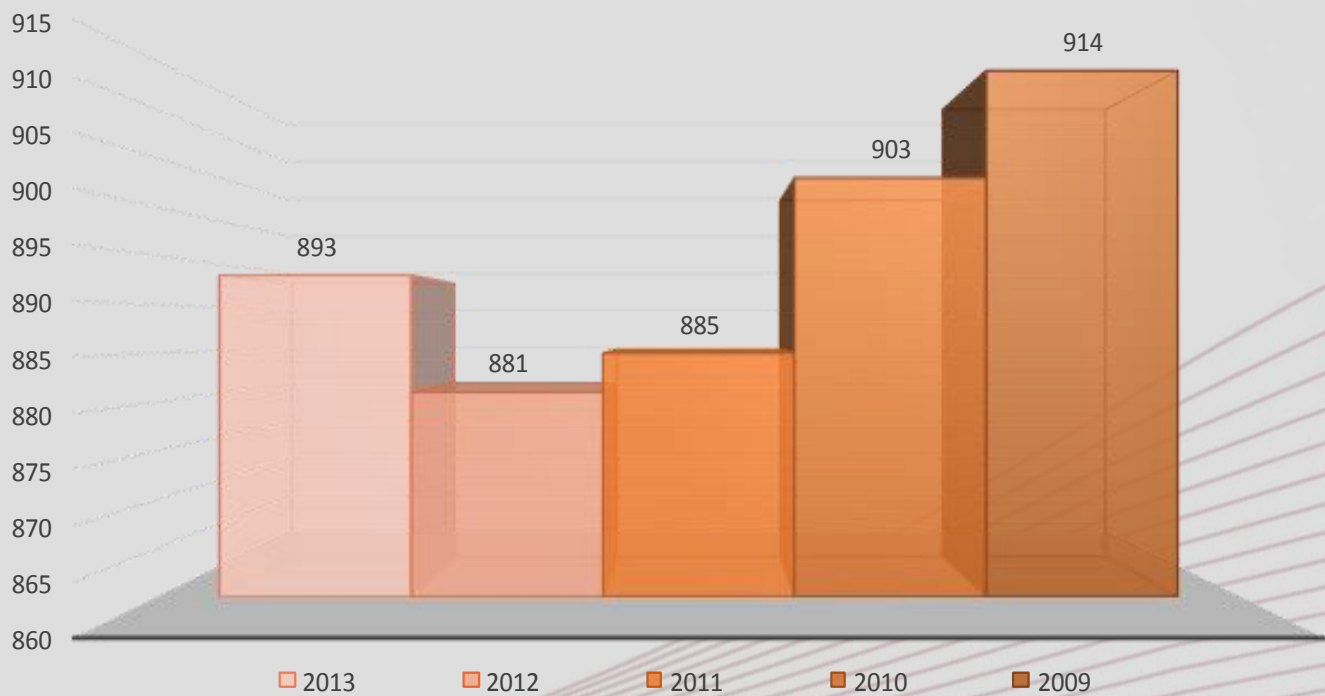
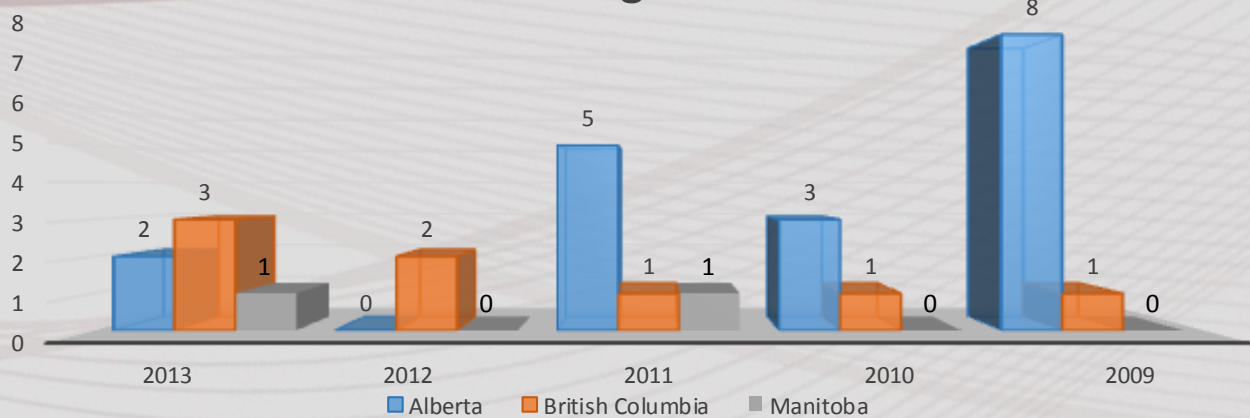


Figure 1 (above) – The chart compares active members from 2009-2013

Figure 2 (below)– The chart below lists members that have departed to other provinces during the same time period (2009-2013)

Out Migration



2013 Members by Branch

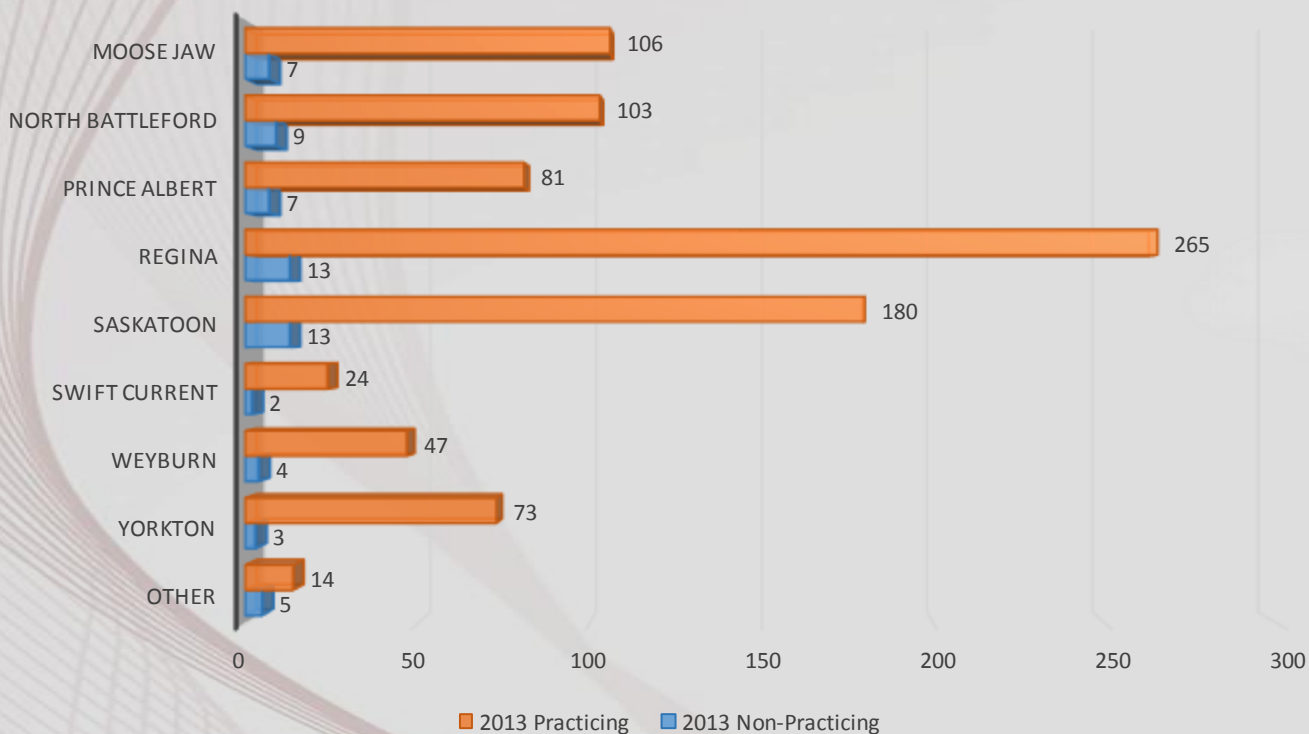
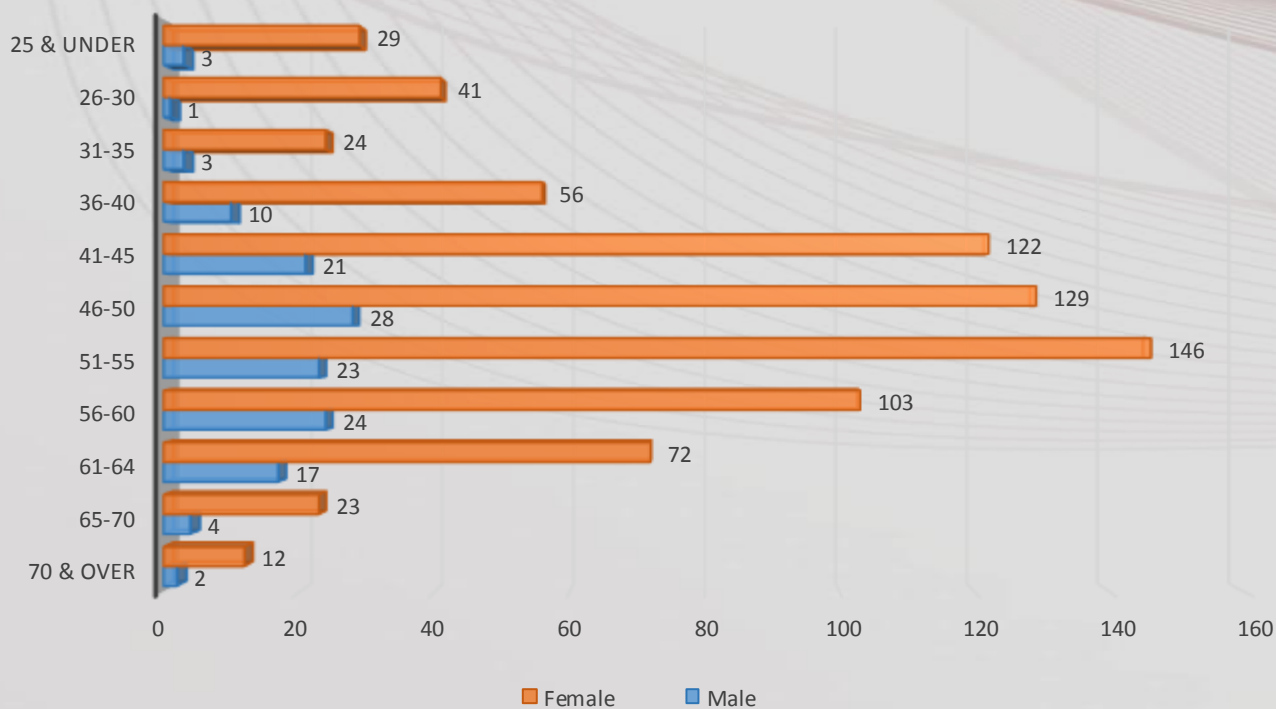


Figure 3 (above) – This chart compares lists membership numbers (active and non-practicing) according to branch.

Figure 4 (below) – This chart lists active members only according to their current age. The average age of RPNs is rapidly rising.

2013 Active Members by Age & Gender



5 Year Comparison of New Registrations

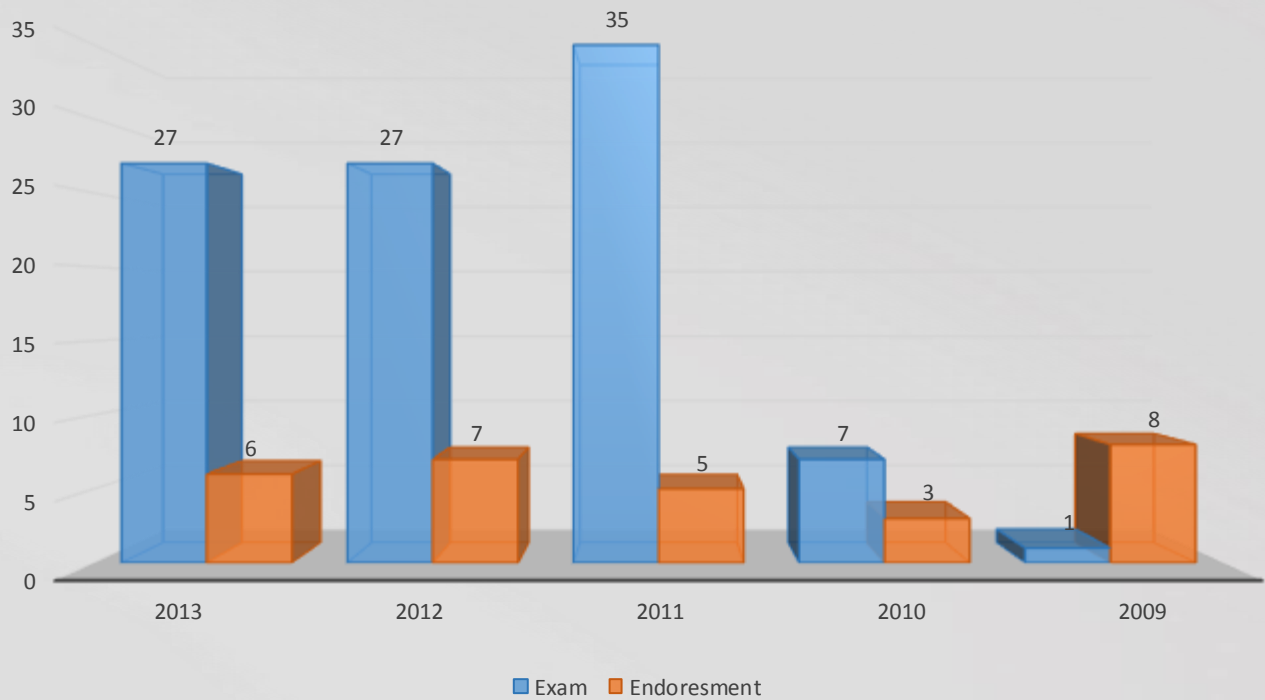
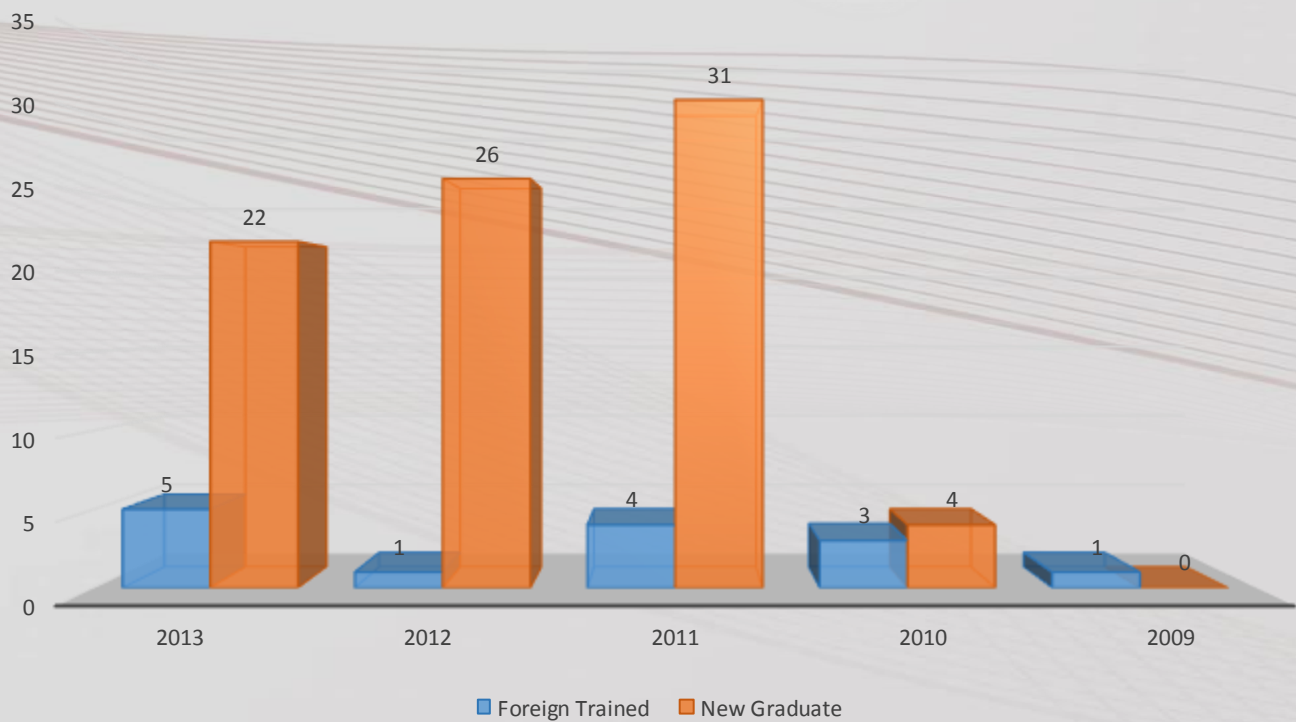


Figure 5— The chart above shows new registration counts from 2009-2013 and whether it was from the exam or endorsement. The SIAST program 's first graduates were in 2011.

Figure 6— The chart below shows members who gained licensure through the RPNC exam and if they were local or international grads.

New Registrations via RPNC Exam



2013 Members by Primary Employing Agency

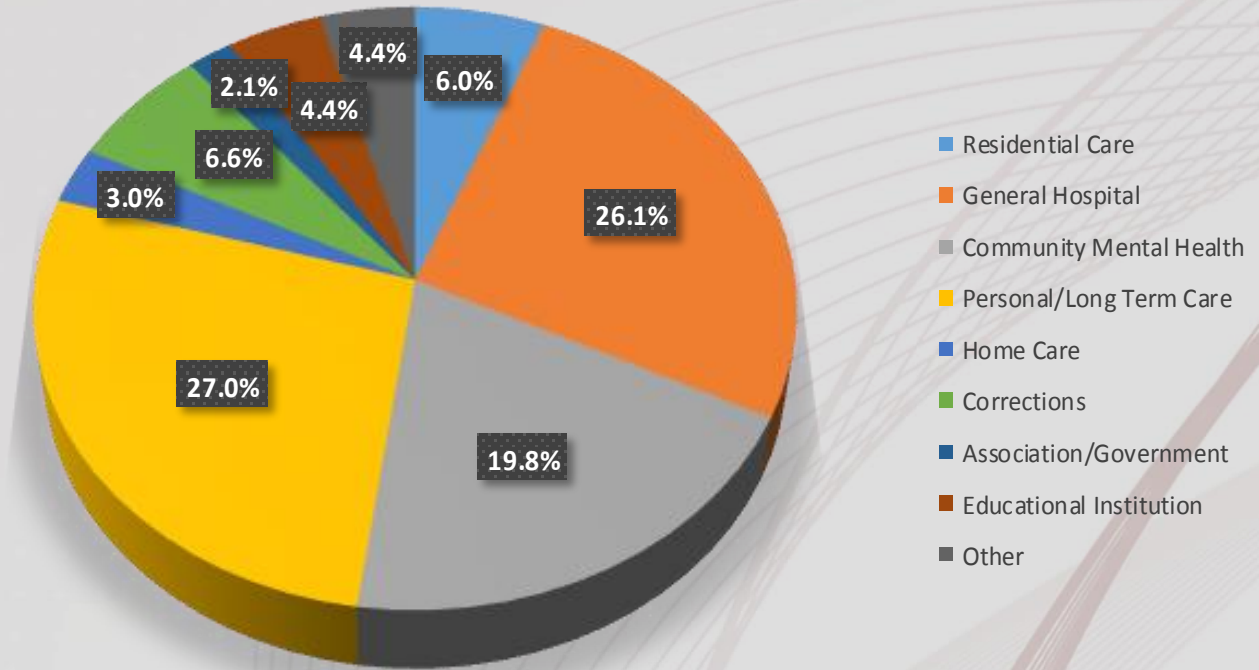
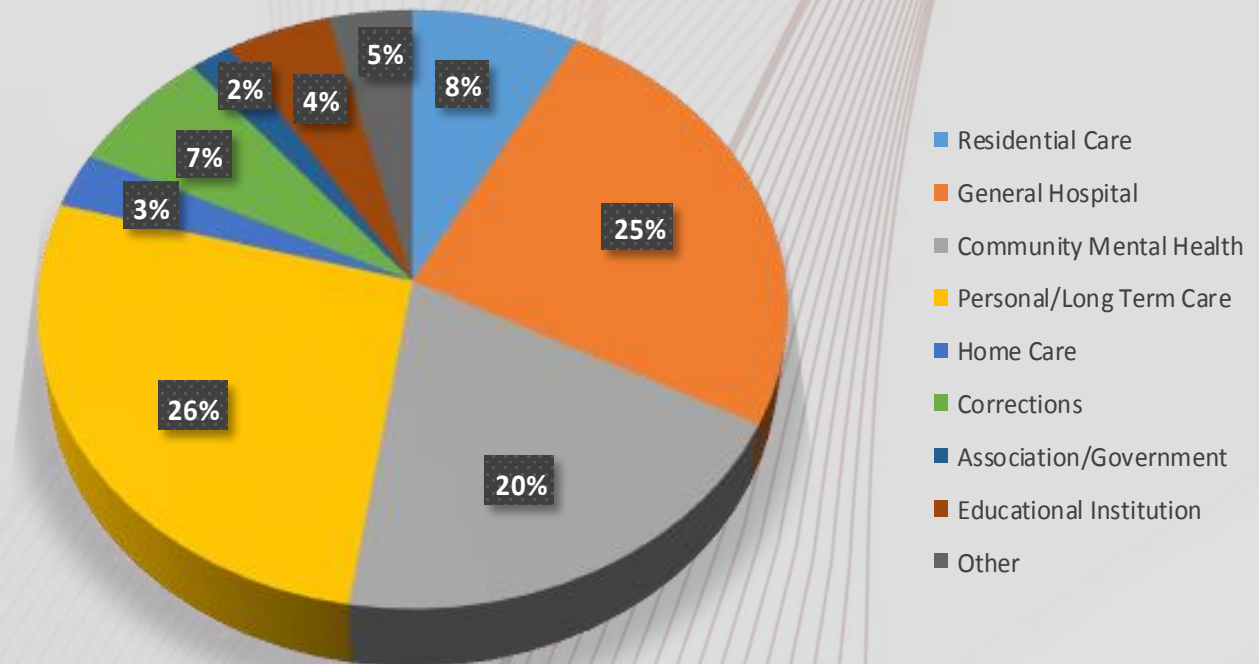


Figure 7— The chart above compares members by primary employing agency in 2013, contrasted with Figure 8 (below) which was for the year prior. The numbers remain fairly consistent, with only a notable decrease in residential care and increase in general hospital and personal/long term care.

2012 Members by Primary Employing Agency



Committee & Branch Reports

Professional Conduct Committee

Chairperson: Delores Maduke **Number of Meetings:** 3

There were four complaints that were carried over into 2013 from 2012. These were concluded with three of the complaints having no further action taken. One concluded with a voluntary withdrawal of membership from the association.

There were six new complaints in 2013. Two of the complaints were resolved with no further action being taken. The for remaining complaints have ongoing investigations. In total, there were 10 complaints for 2013 with a resolution for six of them, four continue to be ongoing.

Discipline Committee

Chairperson: Theresa Girardin, RPN **Number of Meetings:** 0

No hearings or meetings were held in the past year. Thank you to all committee members – the time and commitment that is contributed is much appreciated. We will continue to hold hearings as required.

Education Committee

Chairperson: Roberta Jors, RPN **Number of Meetings:** 3

There were 2 applications for funding – both declined as the members did not attend the events funding was applied for. One application for attendance at 2 conferences – information on only one conference received and not a clear indicator of amount being requested. Candace to contact for more information. Request for 4 persons to attend World Congress was granted total amount of funding was \$300.00. One request for conference fee of \$166.95 and another was \$159.24.

Okay given to a second year student to receive the Terry Christianson Scholarship. One RPN awarded a bursary who is pursuing her Masters Degree for a year already completed and for consecutive year. These awards are one time only for separate years. No other applicants for either year. One award to an RPN pursuing her doctorate

Of the audits done 25 from 2011 one needed follow up; of the 25 for 2012 6 required follow up for more information or clarification.

North Battleford Branch

President: Marion Palidwor, RPN

Number of Meetings: 12



The North Battleford Branch has been meeting on a regular basis to plan for our 5th Annual "Champions of Mental Health" Awards Banquet. We are pleased to be sponsoring another five (5) awards honouring people and businesses within the Battlefords that see the benefits of providing positive experiences for our clients. It amazes me that there is still so much stigma around the issue of mental illness. There is so much work we as RPNs need to do to help the community we live in understand that "by the grace of God, there go I." Our Branch will continue to endorse and honour individuals and businesses that understand this concept.

The North Battleford Branch will continue to hold Mental Health Awareness Clinics in our community with the goal of informing and educating the public about mental health issues, recovery and stigma. We have held two such clinics in one of our local malls. We provide written material for the community to take for their information as well, we offer conversation to those who wish to have a conversation about any topic and finally this provides a venue for RPNs to be seen in the community outside the walls of the facilities in which we work. Several branch members have taken an active role within the Battlefords Canadian Mental Health Association. A couple currently sit on the CMHA Board and several other volunteer their time with after hours programming for the CMHA members.

In case you haven't heard, Clara Hughes, a Canadian Olympic medal winner in speed skating, is involved in a national event. Clara is cycling across Canada, bringing awareness to mental health. Clara has depression and has stepped up to bring depression to the forefront nationally by partnering with Bell Canada in the "Let's Talk" campaign. Clara has already begun her cross country ride and will be coming to North Battleford on June 6th, 2014. This event has become another exciting project for many of our Branch Members. Our community has a committee preparing for Clara's ride into our area, and many of our members have stepped up and sit along side community members in preparation. Our community event is "Let's Talk about Mental Health in Our Own Back Yards." We are planning a free community event with a back yard BBQ feel. This partnering has become a very good initiative for educating the community about mental health, recovery and stigma.



Regina Branch

President: Candace Alston, RPN

Number of Meetings: 5



The Regina Branch members focused on revitalizing the Branch over the past year. Members met bimonthly to participate in educational opportunities and become more familiar with current issues that affect psychiatric nursing and discuss ways RPNs can make a difference. The following topics that were explored included: workplace issues and concerns with guest speaker Rosalee Longmore, SUN President and HIV in RQHR with guest speaker Susanne Nasewich, RQHR HIV Strategy Coordinator.

On the lighter side, in September Regina Branch members hosted a Meet and Greet for first year Psychiatric Nursing students. A panel of RPNs that work in variety of settings were invited to attend the event and speak for 5 minutes about the agency and their role as a RPN. Several students and RPNs attended the event. Student had the opportunity to ask the panelists questions about their career journey. Finally the members gathered at the end of the year for an evening of fun and socialization as they tasted a variety of wine and food. A local wine connoisseur guided everyone through the wine tasting and food pairing. It was a fun filled evening that brought RPNs together who were able to renew acquaintances and revitalize the Regina Branch spirit.

The Regina branch has been busy planning the upcoming 2014 AGM hosted in Regina on June 5th and 6th at the DoubleTree by Hilton. Everyone is looking forward to participating in RPN Renewal, Rejuvenation and Revitalization!

Swift Current Branch

President: Jennifer Hennig, RPN

Number of Meetings: 4



Our Branch tries to meet quarterly to foster a sense of belonging within our profession. At our meetings, we discuss areas of professional interest such as the sharing of workshop ideas individual members have attended, utilizing the RPNews to discuss articles of interest & upcoming events, or discussing concerns as they relate to the profession. Our Branch has not had success in fundraising ideas partly due to the low membership as well as in difficulty meeting requirements of the municipality. This tends to hinder our efforts in being able to support membership financially in furthering their educational opportunities relating to the professional growth of members.

Our branch participates in the Career Expo at the local high school in the fall. The project has received great support from many! Several RPN's volunteered to sit at the table and answer questions from high school students, teachers and guidance counsellors. The give-aways provided by RPNAS are much appreciated. We would like to continue our annual participation in the Career Expo to promote the profession of Psychiatric Nursing to students and the community. As our Branch is not able to generate sustainable funding, we have decided to approach our health region's Noble Irwin Foundation to ask for their financial support in providing registration costs towards the expo. This will also be a great opportunity for us to educate Foundation members on the roles of psychiatric nurses within our region.

Right: Robert Allen, RPN, Shirley Bedford, RPN and Honourable Randy Weekes, Minister of Rural and Remote Health (left to right) at the 2013 AGM & Education Day.



Centre Left: Robert Allen and Shirley Bedford after she received her surprised award for 40 Years of Active Practice at the 2013 Mental Health Champions event in North Battleford. *Photo Courtesy of Battleford News Optimist/Regional Optimist*

Centre Right: Carol Funk, RPN (left) presenting a Mental Health Volunteer Award to Joyce Salie (right). *Photo Courtesy of Battleford News Optimist/Regional Optimist*

Bottom: Karolayna Isley, winner of the Leflar Memorial Award for 2012, presented at the 2013 AGM.





Registered Psychiatric Nurses of Canada
providing leadership for the profession of psychiatric nursing

Mobility and Assessment of Canadian and Internationally Educated Registered Psychiatric Nurses

The pan-Canadian “*Mobility and Assessment of Canadian and Internationally Educated RPNs*” project launched in December, 2012 seeks to improve the mobility and employment of Canadian and internationally educated Registered Psychiatric Nurses (RPNs) by facilitating the assessment and recognition of RPNs. Funded in part by the Government of Canada’s Foreign Credential Recognitions program and the Registered Psychiatric Nurses of Canada (RPNC), the RPNC will reach out to a broad range of stakeholder groups in Canada’s healthcare to: 1) document the barriers and enablers to improving the mobility of the Registered Psychiatric Nurse (RPN) profession in Canada; 2) inform stakeholder groups about the competencies and role of the RPN; and, 3) identify options to consider to move forward as a profession.

Co-Chaired by Barbara Lowe, College of RPNs of Alberta, and Laura Panteluk, College of RPNs of Manitoba, a 12 member Project Management Committee (PMC) consisting of representatives of the RPN regulatory authorities, educators, employers and the federal government was formed. Robert Allen and Candace Alston are members of the PMC on behalf of RPNAS. The Health Human Resources Group is providing the overall management and communication/stakeholder relations service and support and is conducting the Environmental Scan to understand the challenges and enablers to the recognition of the profession in Canada. The environmental scan is currently underway. RPNs were surveyed and asked about their challenges and experiences moving to another province to work in psychiatric nursing. Key informant interviews will be conducted in April and May. The final scan report is expected in July.

Assessment Strategies Inc. (ASI) is retained to develop national RPN entry-level competencies, RPN profession overview and to create the Entry-Level Competency – Education Mapping tool. The first draft of the RPN entry-level competencies document was prepared and reviewed by stakeholders across Western Canada. Fourteen were invited to participate in the Saskatchewan focus group session. The next draft of the entry-level competencies document will be validated through an online survey of RPNs. The final competency document and RPN profile is expected by June, 2014.

The deliverables of these two components of the project will be discussed with stakeholder groups in Ontario, Atlantic Canada and Northern Canada in a series of targeted meetings. Separate meetings with federal employers will also be convened. These events will take place in the fall of 2014. The project is expected to wrap up by the end of 2014.

Financials

2015 Proposed Budget

2013 Financial Audit

2015 Proposed Budget

Revenues

| | | |
|----------------------------|--------------|----------------|
| Annual Fee Practicing | 544,750 | (870 Members) |
| Annual Fees Non Practicing | 3,000 | |
| Temporary License | 2,200 | |
| Registration fees | 1,900 | |
| Interest Income | 11,000 | |
| Liability insurance | 6,230 | |
| Registration examinations | 3,000 | |
| Miscellaneous | <u>3,500</u> | |
| Total Revenues | | <u>575,580</u> |

Expenditures

Expenditures Part A

| | | |
|-----------------------------|---------------|---------|
| Office Insurance | 750 | |
| Salaries | 300,000 | |
| Employee Benefits | 60,000 | |
| Taxes | 6,000 | |
| Telephones | 4,000 | |
| Postage/Bank Changes | 6,000 | |
| Office Supplies | 10,000 | |
| Legal Fees/Audit | 10,160 | |
| Printing Costs | 5,000 | |
| Executive Director Expenses | 12,000 | |
| Staff Development | 1,500 | |
| Computer Support | 5,000 | |
| Utilities | <u>12,000</u> | |
| Total | | 432,410 |

Statutory Functions

| | | |
|------------------|--------|--|
| Special Projects | 12,500 | |
|------------------|--------|--|

| | | |
|-----------------------------|--------|--------|
| Council Meetings | 10,000 | |
| Council Insurance | 2,500 | |
| Council Honorarium | 4,000 | |
| Council Development | 2,000 | |
| Disciplinary Hearings | 10,000 | |
| Professional Conduct Legal | 10,000 | |
| PCC Chair Honorarium | 500 | |
| Discipline Chair Honorarium | 500 | |
| Registrar Travel | 10,000 | |
| Election | 1,400 | |
| International Conference | 10,000 | |
| Total Statutory Functions | | 73,400 |

Representative Activities / Services

| | | |
|--|-------|--------|
| Provincial Student Resources | 1,000 | |
| Special Education Fund | 3,000 | |
| Bursaries/Scholarships | 8,000 | |
| Membership Fees | 1,500 | |
| Delegate Expenses | 1,500 | |
| Executive Travel | 3,000 | |
| Total Representative Activities / Services | | 18,000 |

Membership Services

| | | |
|---------------------------|-------|--------|
| Annual Meeting | 6,000 | |
| Liability Insurance | 6,230 | |
| RPN NEWS | 6,000 | |
| Annual Report | 7,500 | |
| Public Relations | 6,000 | |
| Total Membership Services | | 31,730 |

Total Expenditures Part A 555,540

Expenditures Part B

| | | |
|--|--------|---|
| Statutory Committees | 5,500 | (Legislation, Professional, Conduct, Discipline, Nominations) |
| RPNC | 4,000 | |
| Special Projects/RPNP/Program Approval | 10,540 | |
| Total Expenditures Part B | | <u>20,040</u> |

Total Expenditures 575,580

Registered Psychiatric Nurses Association of Saskatchewan

Financial Statements

Tuesday, December 31, 2013

Registered Psychiatric Nurses Association of Saskatchewan

Tuesday, December 31, 2013

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FRANK E. GARRETT, BBA, CMA

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Regina, SK S4P 2P5
Tel (306) 565-2777
Fax (306) 565-2633

INDEPENDENT AUDITOR'S REPORT

April 15, 2014

To the Board of Directors
Registered Psychiatric Nurses Association of Saskatchewan

I have audited the statement of Financial Position of Registered Psychiatric Nurses Association of Saskatchewan as at December 31, 2013 and the Statements of Operations, Statement of Unrestricted Net Assets and Cash Flows for the year then ended. These financial statements are the responsibility of the company's management. Our responsibility is to express an opinion on these financial statements based on our audit.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for notforprofit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditors' Responsibility

Our responsibility is to express opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. These standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditors' judgment, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for audit opinion.

Opinion

In my opinion, these financial statements present fairly, in all material respects, the financial position of the company as at December 31, 2013 and the results of its operations and cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Priority-One Business Services Ltd.


Certified Management Accountant

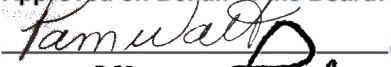

Registered Psychiatric Nurses Association of Saskatchewan

Statement of Financial Position

Tuesday, December 31, 2013

| | Note | 2013 | 2012 |
|--|------|---------------------|---------------------|
| Assets | | | |
| Current Assets | | | |
| Cash | 2. | \$ 499,822 | \$ 531,319 |
| Accounts receivable, net of allowances | | 4,263 | 483 |
| Other current assets | | 18,134 | 19,163 |
| Total Current Assets | | 522,219 | 550,965 |
| Long term investments | 5. | 449,969 | 458,088 |
| Property, plant and equipment, net of accumulated amortization | | 96,241 | 101,889 |
| Total Assets | | \$ 1,068,429 | \$ 1,110,942 |
| Liabilities and Shareholders' Equity | | | |
| Current Liabilities | | | |
| Accounts payable and accrued liabilities | | \$ 30,435 | \$ 31,705 |
| Deferred revenue | e. | 453,003 | 515,794 |
| Total Current Liabilities | | 483,438 | 547,499 |
| Equity | | | |
| Contingency Reserve Fund | | 127,352 | 127,352 |
| Investment in capital assets | | 96,241 | 101,888 |
| Bursary Reserve | | 42,446 | 42,446 |
| Unrestricted Net Assets | | 318,952 | 291,757 |
| Total Equity | | 584,991 | 563,443 |
| Total Liabilities and Equity | | \$ 1,068,429 | \$ 1,110,942 |

Approved on Behalf of the Board:

The accompanying notes are an integral part of these financial statements.

Registered Psychiatric Nurses Association of Saskatchewan

Statement of Operations

For the Year Ended Tuesday, December 31, 2013

| | 2013 | 2012 |
|--|--------------------|--------------------|
| Revenue | | |
| Non-active fees | \$ 3,100 | \$ 4,000 |
| Licensing fees | 547,096 | 524,195 |
| Interest income | 16,149 | 17,964 |
| Other revenue | 9,153 | 28,009 |
| Member's liability insurance | 6,258 | 6,156 |
| Gains (losses) on disposal | - | 4,338 |
| Administration fees | 4,780 | 3,470 |
| Promotional | 246 | 834 |
| Total revenue | 586,782 | 588,966 |
| Operating expenses | | |
| Advertising and promotion | 1,642 | 44 |
| Council and membership meetings | 29,337 | 34,020 |
| Amortization of tangible assets | 5,648 | 16,102 |
| Employee benefits | 49,948 | 41,328 |
| Insurance | 9,844 | 8,001 |
| Interest and bank charges | 2,570 | - |
| Memberships and licenses | 8,166 | 5,411 |
| Office expenses | 31,187 | 35,453 |
| Professional fees | 15,789 | 10,281 |
| Property taxes | 5,803 | 5,711 |
| Committees | 14,785 | 10,156 |
| Repairs and maintenance | 13,890 | 13,000 |
| Salaries and wages | 296,223 | 278,471 |
| Training | 21,946 | 43,467 |
| Membership development | 29,158 | 17,042 |
| Travel expenses | 6,529 | 30,991 |
| Utilities | 9,846 | 14,582 |
| Donations | 1,025 | 3,212 |
| Discipline hearings and professional conduct | 46,018 | 27,541 |
| Promotional | 15,030 | 22,865 |
| Total operating expenses | 614,384 | 617,678 |
| Revenue over expenses | \$ (27,602) | \$ (28,712) |

The accompanying notes are an integral part of these financial statements.

Registered Psychiatric Nurses Association of Saskatchewan

Statement of Unrestricted Net Assets

For the Year Ended Tuesday, December 31, 2013

| | 2013 | 2012 |
|---|-------------------|-------------------|
| Contributed and other surplus | \$ 291,757 | \$ 303,565 |
| Net income (loss) | (27,602) | (28,712) |
| Changes in Assets | 54,797 | 16,904 |
| Ending Balance-Unrestricted Net Assets | \$ 318,952 | \$ 291,757 |

The accompanying notes are an integral part of these financial statements.

Registered Psychiatric Nurses Association of Saskatchewan

Statement of Cash Flows

For the Year Ended Tuesday, December 31, 2013

| | Note | 2013 | 2012 |
|---|------|-------------------|-------------------|
| CASH FLOWS FROM OPERATING ACTIVITIES: | | | |
| Cash received from contributions | | \$ 606,494 | \$ 607,304 |
| Cash received from unrestricted investment income | | 16,149 | 17,964 |
| Cash paid for program service expenses | | (222,195) | (265,683) |
| Cash used for Council and Committee expenses | | (44,122) | (34,020) |
| Bursaries awarded | | (5,070) | (5,600) |
| Cash paid to employees | | (296,223) | (278,473) |
| TOTAL CASH FLOWS FROM OPERATING ACTIVITIES | | 55,033 | 41,492 |
| CASH FLOWS FROM INVESTING ACTIVITIES: | | | |
| Capital additions | | - | (24,476) |
| Proceeds from sale of available for sale securities | | 360,000 | 240,000 |
| Purchase of long-term investments, net | | (503,066) | (150,000) |
| Proceeds on disposal of long-term investments | | 56,536 | 127,519 |
| NET CASH USED BY INVESTING ACTIVITIES | | (86,530) | 193,043 |
| CASH FLOWS FROM FINANCING ACTIVITIES: | | | |
| OTHER ACTIVITIES: | | | |
| Cash and cash equivalents at beginning of year | | 531,319 | 296,784 |
| Cash and cash equivalents at end of period | | \$ 499,822 | \$ 531,319 |

The accompanying notes are an integral part of these financial statements.

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the Year Ended Tuesday, December 31, 2013

1. Significant Accounting Policies

The Registered Psychiatric Nurses Association of Saskatchewan (the "Association") is the professional Association with regulatory authority for the registration and licensing of psychiatric nurses in Saskatchewan and is incorporated under a Special Act of Saskatchewan. The Association is exempt from income tax under paragraph 149(1)(1) of the Federal Income Tax Act.

a. Property, plant and equipment

Property, plant and equipment is carried at cost. Depreciation is calculated using the straight-line method over estimated useful lives ranging from:

| | Rate |
|-------------------------|-----------|
| Buildings | 20 years |
| Furniture and equipment | 3-5 years |

b. Impairment of long lived assets

The Association assesses impairment of all of its financial assets measured at cost or amortized cost. The Association groups assets for impairment testing when there are numerous assets affected by the same factors. Management considers whether there has been a breach in contract, such as a default or delinquency in interest or principal payments in determining whether objective evidence of impairment exists. When there is an indication of impairment, the Association determines whether it has resulted in a significant adverse change in the expected timing or amount of future cash flows during the period. If so, the Association reduces the carrying amount of any impaired financial assets to the highest of: the present value of cash flows expected to be generated by holding the assets; the amount that could be realized by selling the assets; and the amount expected to be realized by exercising any rights to collateral held against those assets. Any impairment, which is not considered temporary, is included in current period excess (deficiency) of revenues over expenses.

The Association reverses impairment losses on financial assets when there is a decrease in impairment and the decrease can be objectively related to an event occurring after the impairment loss was recognized. The amount of the reversal is recognized in the excess of excess (deficiency) in the period the reversal occurs.

c. Reserves

Contingency Reserve:

The contingency reserve represents an amount established by the Governing Council for the purpose of

...

6

Registered Psychiatric Nurses Association of Saskatchewan

For the Year Ended Tuesday, December 31, 2013

1. Significant Accounting Policies continued

c. Reserves continued

- ... providing for unexpected events. The interest earned on funds established for the contingency reserve remains as part of the general operation of the Association.

Bursary Reserve:

A bursary reserve was established by the Governing Council for the purpose of providing bursaries each year. Interest relating to the bursary reserve is allocated to the operating surplus, and bursary awards are charged to the reserve annually.

d. Financial instruments

The Association recognizes its financial instruments when the Association becomes party to the contractual provisions of the financial instrument. All financial instruments are initially recorded at their fair value, including financial assets and liabilities originated and issued in a related party transaction with management.

At initial recognition, the Association may irrevocably elect to subsequently measure any financial instrument at fair value. The Association has not made such an election during the period. Cash, accounts receivable, short-term investments, long-term investments, and accounts payable and accrued liabilities have been designated to be subsequently measured at their fair value. Fair value is approximated by the instruments' initial cost in a transaction between unrelated parties. Transactions to purchase or sell these items are recorded on the settlement date.

The Association subsequently measures investments in equity instruments quoted in an active market at fair value. Fair value is determined by the instruments' initial cost in a transaction between unrelated parties. Investments in equity instruments not quoted in an active market and derivatives that are linked to, and must be settled by delivery of, unquoted equity instruments of another entity, are subsequently measured at cost less impairment. All financial assets and liabilities are subsequently measured at amortized cost.

e. Revenue recognition

Licensing fees, both active and non-active, which are based on a calendar year, are recognized as revenue in the fiscal year that they are applicable to. Deferred revenue represents fees received during the year that relate to the next fiscal period. All other revenue is recognized when earned.

f. Use of estimates

The preparation of financial statements in conformity with Canadian Accounting Standards for Not-for-Profit Organizations requires management to make estimates and assumptions that affect the ...

Registered Psychiatric Nurses Association of Saskatchewan

For the Year Ended Tuesday, December 31, 2013

1. Significant Accounting Policies continued

d. Use of estimates continued

... reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reporting period. Amortization is based on the estimated useful lives of the capital assets.

These estimates and assumptions are reviewed periodically and, as adjustments become necessary they are reported in excess of revenues and expenses in the periods in which they become known.

g. Fund accounting

Two funds are maintained: Operating Surplus Fund and Investment in Capital Assets Fund.

The Operating Surplus Fund is used to account for all revenue and expenditure related to general and ancillary operations of the Association.

The investment in Capital Assets Fund is used to account for all capital assets of the Association and to present the flow of funds related to their acquisition and disposal, unexpended capital resources and debt commitments.

2. Cash and short term savings

Cash and cash equivalents consist of the following:

| | 2013 | 2012 |
|-----------------------------------|------------|------------|
| Cash (bank chequing and savings) | \$ 499,822 | \$ 531,319 |

3. Property, plant and equipment

Property, plant and equipment consist of the following:

| | 2013 | | 2012 | |
|--|-------------------|-----------------------------|-------------------|-------------------|
| | Cost | Accumulated Depreciation | Net Book Value | Net Book Value |
| Land | \$ 38,250 | \$ - | \$ 38,250 | \$ 38,250 |
| Buildings | 141,990 | (99,511) | 42,479 | 44,249 |
| Machinery, equipment, furniture and fixtures | 107,077 | (91,565) | 15,512 | 19,390 |
| Total | \$ 287,317 | \$ (191,076) | \$ 96,241 | \$ 101,889 |

Registered Psychiatric Nurses Association of Saskatchewan

For the Year Ended Tuesday, December 31, 2013

4. Credit risk

Credit risk

The Association does not face significant credit risk exposure. The fair values of items that meet the definition of financial instruments approximate their carrying values. These items include accounts receivable, notes receivable and short-term debt.

Fair value

The carrying amount of the Association's financial instruments approximates their fair value due to their relatively short-term maturity, except for long-term investments which are recorded at their fair value, determined by reference to published bid price quotations in an active market

Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. Changes in market interest rates may have an *effect* on the cash flows associated with some financial assets and liabilities, known as cash flow risk, and on the fair value of other financial assets or liabilities, known as price risk. The Association is exposed to interest rate risk primarily relating to its marketable securities and long-term investments

5. Long-term investments

| | 2013 | 2012 |
|--|-------------------|-------------------|
| Cash | \$ 53,679 | \$ 56,136 |
| Canadian corporate bonds maturing at dates ranging between June 2015 and November 2018 (December 2011 - June 2015 and November 2018), with interest rates at varying rates ranging from 5.2% to 6.75% (December 2011 - 5.20% to 6.75%) | 332,296 | 346,659 |
| United States corporate bonds maturing on June 30, 2018 with interest rate of 6.25% | 56,744 | 55,293 |
| Total | \$ 442,719 | \$ 458,088 |

6. Pension

Employees of the Registered Psychiatric Nurses Association of Saskatchewan participate in the Saskatchewan Healthcare Employees' Pension Plan (SHEPP). The plan is a defined benefit plan and the pension benefits and assets are for all members of the plan and are not segregated by participating organization. Both the employer and employee contribute to the plan. The Association remits the contributions monthly, based on the contribution rate provided by SHEPP, which totaled \$25,852 for the year (December 2012 -\$28,062).

Registered Psychiatric Nurses Association of Saskatchewan

For the Year Ended Tuesday, December 31, 2013

6. Pension continued

Although the plan is a defined benefit plan, the Corporation's financial obligation is limited to contributions in respect of employees' current service.

Contribution rates are as follows:

December 31, 2013 -7.70% (December 31, 2012 -7.70%) of pensionable earnings up to the yearly maximum earnings (CPP) plus 11.00% (December 31, 2012 - 11.00%) of pensionable earnings above the yearly maximum earnings (CPP).

7. Commitments

The Association has committed to a 3 year \$1,000/year bursary for an award to a SIAST student. There is \$1,000 remaining in this commitment, was paid in September 2013.

The Organization also has entered into various lease agreements for office equipment with estimated minimum annual payments as follows:

| | |
|------|-------|
| 2013 | 8,520 |
| 2014 | 8,520 |
| 2015 | 2,625 |

8. Comparative figures

The previous year financial statements were audited by another firm, therefore, certain comparative figures have been reclassified to conform with current year presentations.

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