

*Registered Psychiatric Nurses
Partnering with People*

2015 ANNUAL REPORT

RPN

REGISTERED
PSYCHIATRIC
NURSES
ASSOCIATION OF
SASKATCHEWAN



*RPNAS Council at the 2015 AGM & Education day in Moose Jaw, SK.
Left to Right: Tamara Quine, Syd Bolt, Carlee Schindel, Michael Lummerding, Brenda Francis, Dan Badowich, Rachel Desnomie, Donna Dyck*

VISION

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.

MISSION

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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Staff & Council



Top left to right: Syd Bolt, Donna Dyck, Dan Badowich. Bottom left to right: Brenda Francis, Rachel Desnomie, Tamara Quine



Council 2015-2016

President

Syd Bolt, RPN, Regina

President Elect

Donna Dyck, RPN, Saskatoon

Public Representative

Michael Lummerding

Members-at-Large

Dan Badowich, RPN, Yorkton

Angie Craig, RPN, Regina

Rachel Desnomie, RPN, Regina

Brenda Francis, RPN, Saskatoon

Tamara Quine, RPN, Regina

Carlee Schindel, RPN, Saskatoon

Staff

Executive Director

Robert Allen, RPN, North Battleford

Office Administrator

Kim Clory

Registrar

Candace Alston, RPN, Regina

Director of Operations

Mike Clory

REPORTS





President's Report

In light of recent events in the RPNAS and in the SRNA I thought I would take the opportunity in my President's Report to illustrate and comment on the differences between RPNAS, a professional regulatory body and a union as these events have suggested that there is some confusion on the distinction between the two.

Our vision is that 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.

Our mission is to provide Saskatchewan people with competent psychiatric nursing. This is achieved through meeting the following ends:

- Ensuring the supply of competent Registered Psychiatric Nurses.
- Protecting the public through regulation.
- Continued development of a body of knowledge.
- Developing practice opportunities.
- Advocating for quality integrated mental health services.

We achieve these ends by ensuring the following values of public protection, member competence, accountability and compliance.

A union on the other hand is an organization that exists to enhance the social, economic and general well being of its members. This is a significantly different mandate than a professional regulatory association. And while each has their role to play, it is not the same and one should not be expected to achieve the mandate of the other.

It appears, based on the request for a special meeting and the subsequent resolutions arising, that a number of our members are experiencing some stress regarding the perceived threat to their employment.

While I appreciate these concerns, it is important that members remember the distinction between the two bodies and what are their respective and unique mandates. This clarity will assist in ensuring that issues are raised in the appropriate forum as we move forward.

I look forward to a productive and professional meeting and workshop next month and hope to see a good turnout.

Respectfully submitted,



Executive Director's Report

It is my privilege to submit a report for the year 2015. The past year has been challenging and filled with change. In this age of digital communications and instant communication it is possible to connect people quickly and hold meetings without traveling, documents can be available online and presentations are at your fingertips. We use digital polling to arrange virtual meetings and can be more effective with our time management.

Newsletters and emails make it possible to reach an audience instantly, conduct polls and voting, register for events and schedule your weeks and months.

What is often unseen are the contributions of the technical wizards that make all of these things possible. I salute the men and women that create, program and operate the systems that make all of this possible. In our organization we are indeed fortunate to have Mike and Kim. The modern office work area looks like a control center in an F35, although I have never seen one I can use my imagination!

I am probably not alone in sometimes longing for the old days of regular mail, when you awaited a reply to your letters, and things moved at a slower pace. The demands we face today require many of us to digest vast quantities of information and reports, statistics and reviews in record time, and switch from one stream of work to another many times each day.

When I began working remotely in 2008 I committed to maximizing the use of technology in our association. As I write this report we are conducting our first online election, planning for a member survey, taking registrations for the annual meeting, and completing an annual report which will be online and not mailed out to membership. Members can manage their profile online, keep a portfolio of professional development and update their information instantly.

We have certainly changed as an organization in many ways and can proudly say we have kept up with others in technology and sometimes led the advances. What has not changed is our commitment and values regarding mental illness and mental health and the people we serve. As Council reviews and revises the Ends of the Association they are guided by the interest of the public and our reasons for existence.

Regulation has certainly become our primary function, however we must always remember that we encourage our members to be advocates for the people they serve and we need to find ways to support them.

Sometimes it feels like we are a lone voice crying in the wilderness as we reiterate that mental health is underfunded, particularly here in Saskatchewan. We see little support for an increase in education seats for psychiatric nursing, or for recognition of the looming shortage of RPNs. Indeed some folks seem to feel that anyone can do what we do and perhaps the old adage may apply, “you don’t know what you got till it’s gone”.

Here’s hoping that the need will be recognized. What will be the qualifications of the staff of the new Saskatchewan Hospital? Will they be experts in psychiatric nursing? People suffering from mental illness deserve qualified and competent care!

Last year RPNAS council revised the ENDS. The revised versions are as follows:

E-1: Competent RPNs & GPNs

The End, “Competent Registered Psychiatric Nurses and Graduate Psychiatric Nurses” 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.
3. A credible measure of competence.
4. Criteria for registration and ongoing licensure.

E2: 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. Public and other agencies have reliable mental health information.
2. Government accesses credible information when forming mental health policy.
3. More funds for mental health research.
4. Public policy is in place that prioritizes safety for vulnerable individuals and care givers.

E-3: 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 regulation processes.
4. Members demonstrate ethics, professionalism, and pride in their profession.

E-4: Mental Health is Valued in an Integrated Health System

The End “Mental Health is Valued in an Integrated Health System” is interpreted to include, but not limited to:

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

E-5: Public knowledge and awareness of mental health literacy which is the knowledge and skills that enable people to access, understand, and apply information for mental health.

The End “Public knowledge and awareness of mental health literacy which is the knowledge and skills that enable people to access, understand, and apply information for mental health” 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.

E-6: A Distinct and Vibrant Professional Identity

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

1. An engaged membership
 - i. Members network with other human service providers
2. Members demonstrate professional pride.

Respectfully submitted,





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 2015 graduating class of the Psychiatric Nursing program and welcome them in 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). Protecting the public through regulation.

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 RPNs who 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.

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 inter-provincial 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 – Sask Polytechnic

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

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.

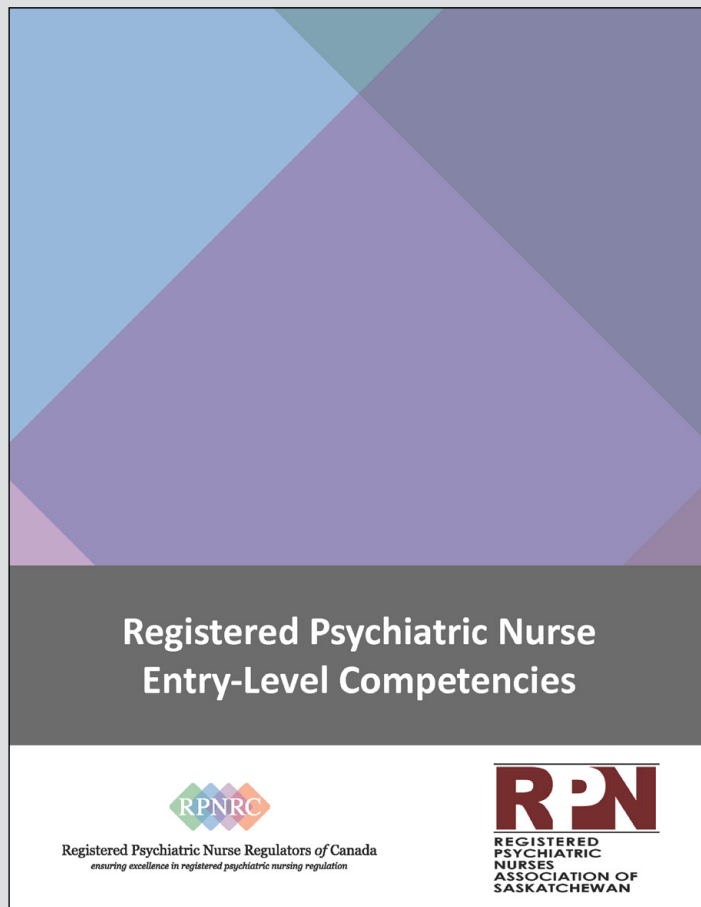
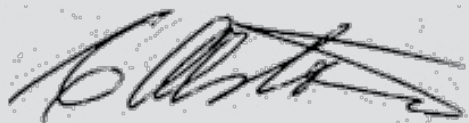
National Nursing Assessment Service (NNAS)

This non-profit corporation established to coordinate 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 has been operational since early 2015.

RPNC Mobility Project

RPNAS has two representatives on the Project Management Committee.

Respectfully submitted,



RPN Entry-Level Competencies were approved by council in December 2014. This document identifies the entry-level competencies that the average, beginning RPN requires for safe, competent and ethical practice. This document can be downloaded from our website, www.rpnas.com/elc.



Branch Reports

Swift Current

Chair: Jennifer Hennig

Meetings: 3

Over 2015 the Swift Current branch remained relatively quiet.

1. We had 3 meetings in 2015 including a breakfast meeting in May for RPN day. A new executive was elected in September at the AGM, which was held at a local restaurant and well attended with 9 members.

- i. Tim Hunter - President
- ii. Mallory Unger - Vice President
- iii. Amanda Mozol - Secretary
- iv. Marilyn Mudry Lautsch - Treasurer

2. RPNAS Swift Current Branch attended the local Career Expo again at the high school in September to promote our profession. Some of the local RPNs have also voiced interest in volunteering their time within the community and at post-secondary institutions to talk about the work we do as psychiatric nurses. This will be explored further at the regional level.

3. No fund raising efforts took place this past year.

North Battleford

Chair: *Marion Palidwor*

Meetings: **6**

RPNAS North Battleford Branch had another successful Champions of Mental Health Gala on May 9, 2015. All of the meetings throughout the year were to plan this event. We were able to donate \$4000.00 total to two separate organizations in our community. \$2000.00 was donated to Interval House and \$2000.00 to Transition Living Inc.

We are currently in the finalized planning states of our 7th Annual Champions of Mental Health Gala for April 30, 2016. This year we are kicking off mental health week instead of ending it. We will also try to resurrect our community mental health clinics this year. We would like to hold at least two this year, depending on volunteer availability.



Special thanks to the setup crew from the 2015 Champions of Mental Health Gala.



Bob Allen presenting Marion Palidwor with an award for her extensive volunteer work for the committee and the Champions Gala. Photo Credit: Battleford News Optimist for the photo.



Big Daddy Tazz, also know as the "Bi-Polar Buddah," took the stage at the 2016 Champions of Mental Health Gala. Tazz is a comedian, motivational speaker and a strong mental health advocate. Photo Credit: Battleford News Optimist.

Moose Jaw

Chair: *Joyce Taylor*

Meetings: 4

On February 19th, 2015 the Moose Jaw Branch was revived after many years of being inactive. Joyce Taylor agreed to act as branch chair and Shelley Smith as secretary/treasurer. We came together mostly as a planning committee to prepare for the AGM that was hosted in Moose Jaw on June 5th, 2015.

A lot was accomplished in a few months and we had great reviews from members regarding the AGM presentations from Carla O'Reilly and Dr. Kariem.

We have decided to carry on and attempt to keep the Moose Jaw Branch active in the coming years.

For the coming year, we are looking at securing the archives that are apparently at VVC and going through the stack of information from the past to see what we can put to use and/or dispose of. We need to find and/or develop the bylaws for the branch, as we have been unable to locate any record of them.



Outgoing president Marion Palidwor and Carla O'Reilly after the presentation at the 2015 Annual General Meeting.



Thanks to the Moose Jaw Branch for hosting the 2015 AGM & Education Day.

Regina

Chair: Candace Alston

Meetings: 5

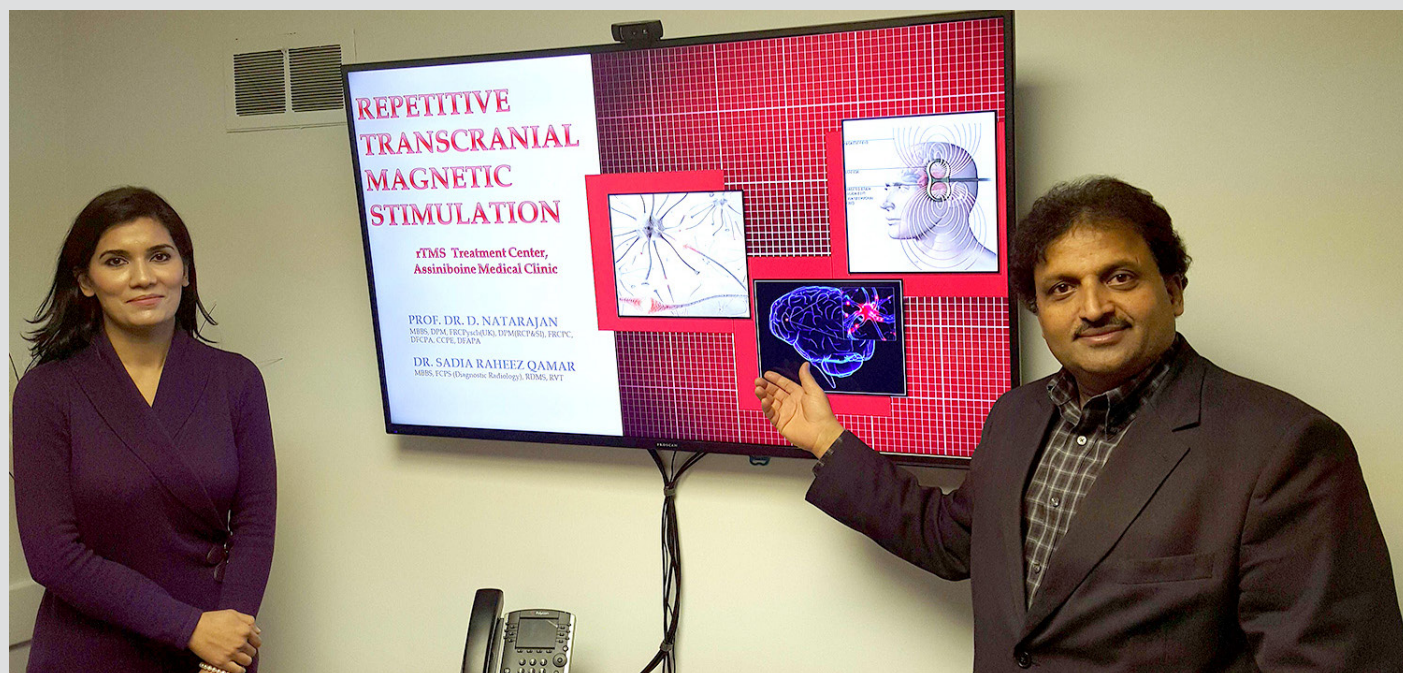
The Regina Branch is continuing to focus on rejuvenation and the inclusion of new graduates into the branch activities.

The first event in fall was the annual Meet and Greet for 1st year Psychiatric Nursing held Thursday, October 15th, 2015 at the Parkway Campus Saskatchewan Polytechnic. Recent graduates of the program were invited to showcase the variety of careers that are available to psychiatric nurses. Thank you to all of the speakers on the panel, Suzanne Rue, Dan Lee, Lacey Bennett, Vero Perrault Finch, Mandy Boersch, Brooks Brhelle and Alex Sawa and Karolayna Isley.

In December, the branch held a year end celebration and social event at the Lakeview United Church. We had a fun night of learning how to cook Indian dishes. We then very much enjoyed eating those delicious foods.

In February, we had a presentation by Dr. Natarajan who spoke about his clinic and introduced us to transcranial magnetic stimulation an alternate treatment to ECT.

We have a plan to hold a social/BBQ sometime in June for members but especially grads from 2010 to 2016. This would be a reunion sponsored by the Regina Branch of RPNAS to provide an opportunity to network and educate grads about branch and its focus and to educate ourselves about issues in psychiatric nursing practice. This will also provide recent grads an opportunity to share and discuss their perceptions.



Dr. D Natarjan (right) and his colleague Dr. Sadia Raheez Quamar present to members of the Regina Branch on rTMS therapy, or Repetitive Transcranial Magenitic Stimulation. rTMS is a non-invasive treatment for anxiety and depression that uses magnets to stimulate the brain. It has been seen as a supplement to existing treatments and can be an alternative for those that don't respond well to traditional medications.



Committee Reports

Education

Chair: *Roberta Jors*

Meetings: *1*

A partial committee met in May 2015. There was one application for the Terrance B. Christiansen Memorial Bursary and it was awarded to Ezra J. Paul. One application was received for the Psychiatric Nursing Program Student Year III Bursary which was also awarded to Ezra J. Paul.

RPN Awards were given to Sue Myers and Shirley Bedford.

There were 2 applicants for the Special Education Fund and each were awarded \$300.00.

25 members were reviewed for CPD credits, 4 of those needed further follow ups.

The committee sent suggestions forward to council to consider to provide clarifications to members when completing the audit forms as most follow ups are related to not providing what is required.

The committee will meet again in May 2016 to review audits, requests for bursary, education fund and awards that are available to members and students.

Discipline

Chair: *Theresa Girardin*

Meetings: *2*

The committee held two hearings this past year. The discipline orders have been published in the RPNAS Newsletter.

Thank you to the members of the committee who volunteer their time and their expertise.

Nomination

Chair: *Pam Watt*

Meetings: *0*

An election was not required in 2015 as there were not enough nominations to have an election. There were three available council positions, two of which were filled through acclamation.

Professional Conduct

Chair: *Pat Thronberg*

Meetings: *5*

In mid-2015, Pat Thronberg replaced Delores Maduke as chair of the committee. We wish to thank Delores for her many years of volunteer service as chair to the committee.

The committee faced a year of complex cases that required significant effort from both members of the committee, investigators and RPNAS' legal team.

There were a total of 5 complaints that remained ongoing from 2014. Of these, 3 were resolved. One complaint was referred to the discipline committee and two were resolved with no further action required.

In 2015 there were 3 new complaints, of those two are ongoing into 2016. One was resolved with no further action required.



Project Report

Online System

In 2015 RPNAS took on an ambitious project to convert from a paper-based system to a digital system with online self service for members. The project overall was a huge success, where members for the first time were able to renew their license online with a few quick clicks instead of dealing with the slow traditional paper methods. It being the first time members had access to this system it certainly wasn't without some challenges and bugs, however RPNAS staff were available to take toll-free calls from those that needed assistance.

New registrants have also been able to take advantage of the online system, where applicants including new graduates and endorsements from other provinces have been able to complete their full application and upload the necessary credentials online. Almost all paper has been removed from this process. For new members from mid-2015 onward no paper files need to be maintained.

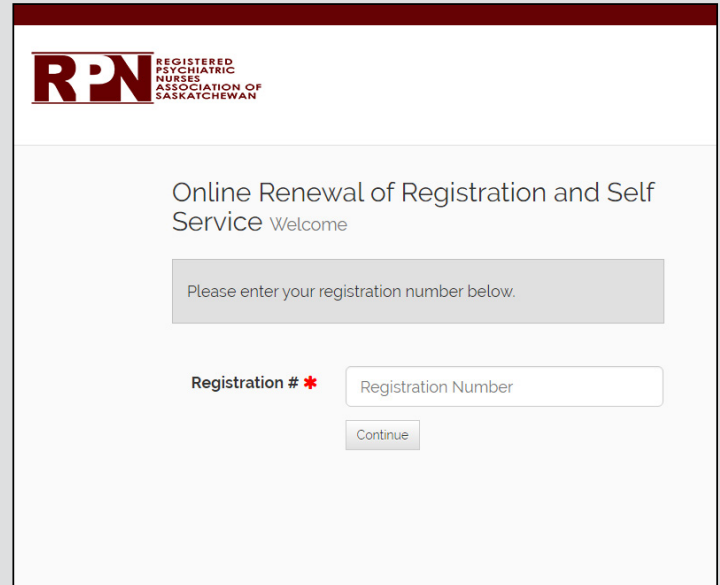
The system also allows for a real-time online public register of members which significantly reduced the number of calls to RPNAS Central Office after the renewal period was completed to validate licenses.

RPNAS invested significant resources to ensure the project was a success. This included process analysis to determine what improvements could be made to application and renewal procedures to reduce duplication of data collection and improve methods of communication pre and post renewal.

In November 2015 RPNAS released a survey to membership asking for feedback about the renewal process and to measure the success of the implementation. Our goal was to measure members' feelings towards the new system as well as use the feedback and constructive criticism to improve the system in the future. Over 150 members, or nearly

18% of our total membership responded to the survey. The response was overwhelmingly positive with a 97% satisfaction rating. Based on member feedback, additional features and improvements are being implemented throughout 2016 to make the next renewal process even easier. You can see some of the results of the survey and data we collected after renewal below.

Special thank you to all RPNAS members for your cooperation and patience with the online renewal process. Members were instrumental in the discovery and correction of bugs. We thank you for taking the time to call in and speak to staff to report these issues. You helped make this project the success it was.

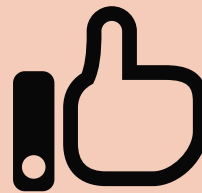


The login page to RPNAS' self service portal for members. From this portal members can update their contact information, keep track of their CPD credits with a professional development portfolio, renew their license and pay annual dues as well as access historical receipts. RPNAS has and continues to implement additional features based on member feedback.

Project Statistics, Survey Results & Member Feedback



55,000
documents
scanned



97% were satisfied
with their renewal
experience.



I don't consider myself a particularly tech savvy person & I felt rather intimidated at this new task. I did experience some frustration when I found that the information wasn't being accepted & I needed to re-start the process over & again. After making time to contact the office during daytime hours, the problem was corrected rather quickly thereafter. I was pleased (& relieved) that I got through the process.



Only 11% found
online renewal
difficult.



99% believe online
renewal will be
easier next year

“

I liked how easy it was and up to date it was. I loved the reminders, it's great for us procrastinators! Overall I really liked it and you can add your CPD credits throughout the year and not worry about losing your papers!

”

“

I made a error when I entered hours worked on the online form and submitted it incorrect. I contacted your office by email and it was corrected for me that same day. That was impressive!

”



\$8200 projected savings for 2016 in just printing and postage



86% were happy with how RPNAS communicated the changes to renewal

“

It is difficult to get used to not having my paper license. Could we get one that we could print off if we want?

”



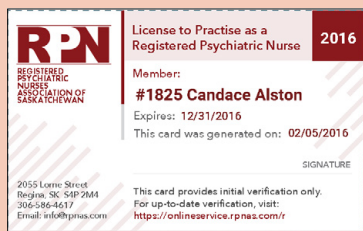
70% said online renewal was the same or faster than paper



“

Pleased that next year the process will be quicker but a paper license would be appreciated as I use that to remember my registration number. Maybe a place to print out a current registration would be an option.

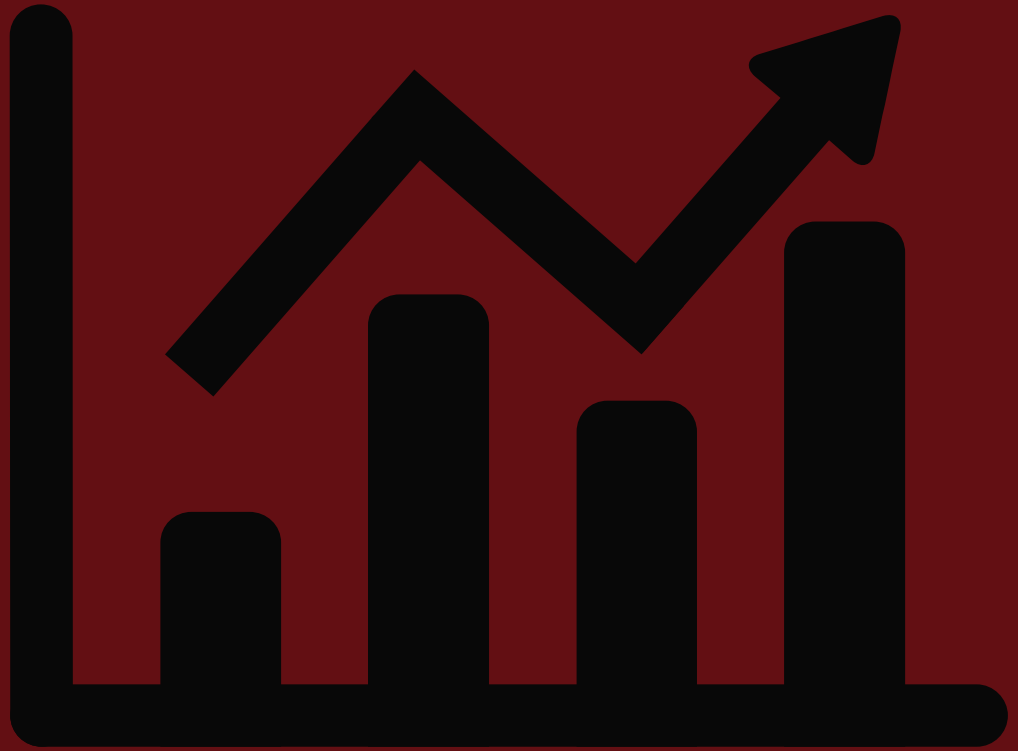
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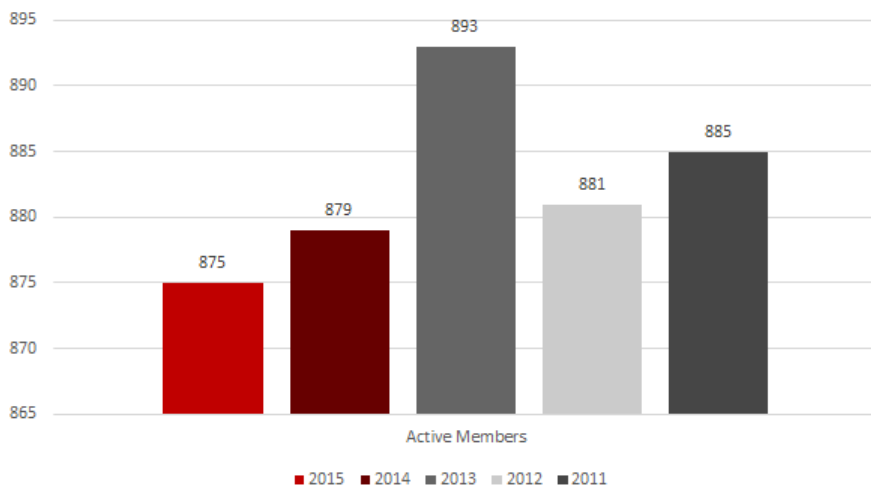
Yes! In response to member feedback we introduced a printable wallet card available in the online self-service area.



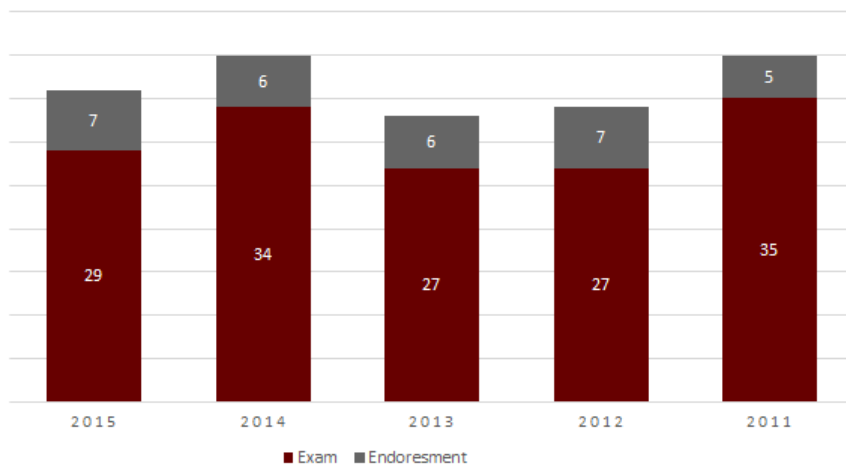
STATISTICS



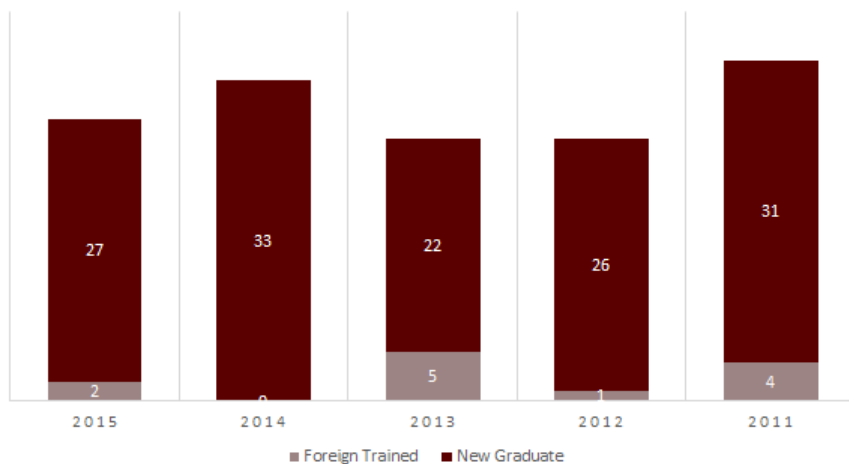
5 YEAR COMPARISON OF PRACTICING MEMBERS



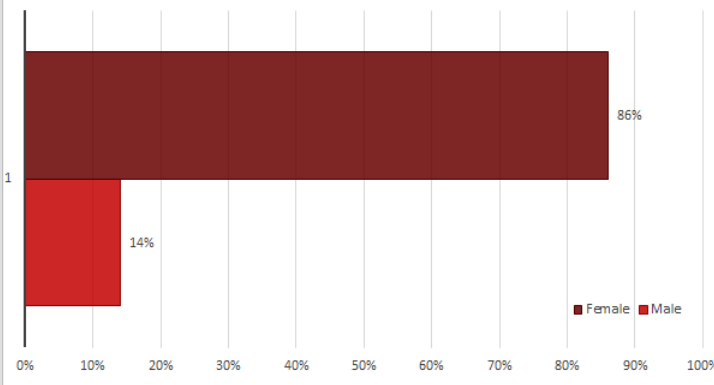
5 YEAR COMPARISON OF NEW REGISTRATIONS



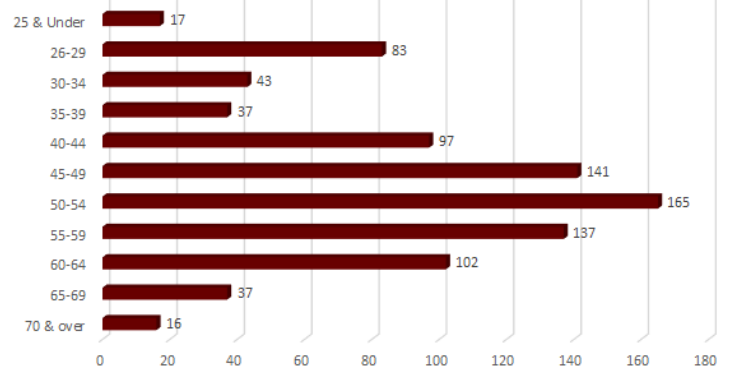
NEW REGISTRATIONS VIA RPNC EXAM



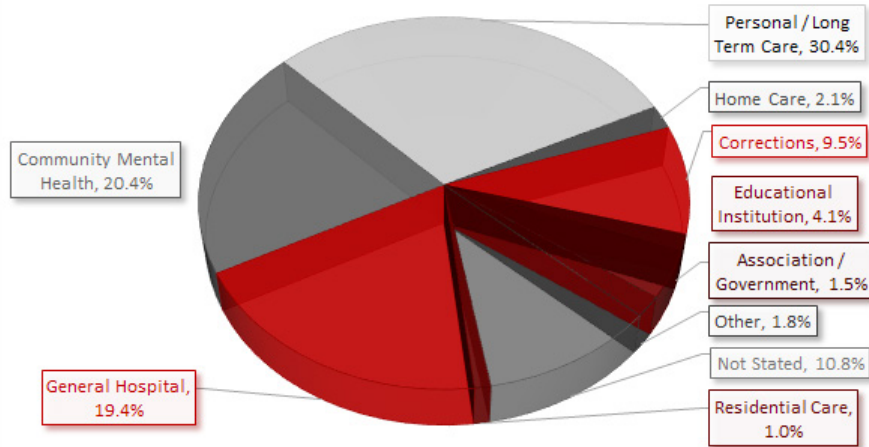
2015 MEMBERS BY GENDER



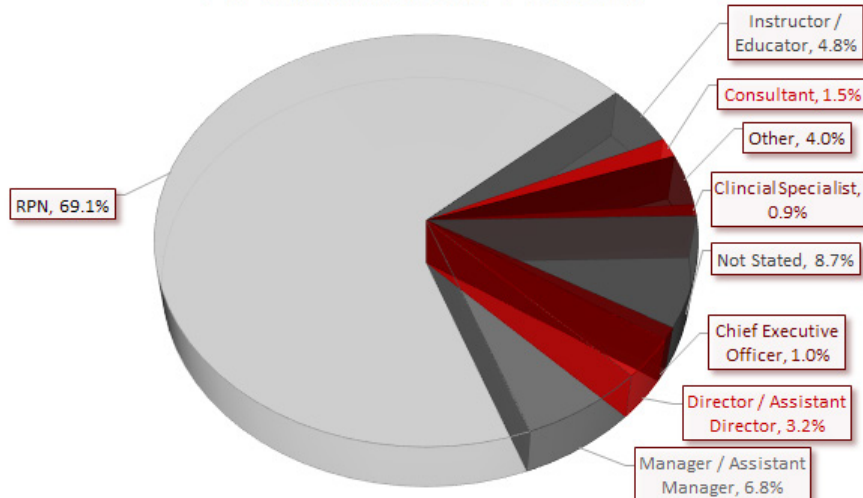
2015 ACTIVE MEMBERS BY AGE



2015 MEMBERS BY PRIMARY EMPLOYING AGENCY



2015 MEMBERS BY POSITION



FINANCIALS



2017 Budget

Revenues

Annual Fee Practicing	610,050
Annual Fees Non Practicing	3,000
Temporary License	4,500
Registration fees	2,100
Interest Income	11,000
Liability insurance	6,230
Registration examinations	3,000
Miscellaneous	3,500
Total	643,380

Total Revenues

643,380

Expenditures

Expenditures Part A

Office Insurance	1,500
Salaries	327,000
Employee Benefits	50,000
Taxes	7,000
Telephones	4,000
Maintenance	5,000
Postage/Bank Changes	3,500
Office Supplies	9,000
Legal Fees/Audit	13,000
Printing Costs	2,000
Executive Director Expenses	12,000
Staff Development	1,500
Computer Support	7,000
Utilities	11,000
Total	453,500

Statutory Functions

Council Meetings	13,000
Council Insurance	2,500

Council Honorarium	4,000
Council Development	8,000
Disciplinary Hearings	6,000
Professional Conduct Legal	40,000
PCC Chair Honorarium	500
Discipline Chair Honorarium	500
Registrar Travel	12,000
Election	700
International Conference	10,000
Total Statutory Functions	97,200
Representative Activities / Services	
Provincial Student Resources	1,000
Special Education Fund	3,000
Bursaries/Scholarships	5,000
Membership Fees	1,500
Delegate Expenses	2,000
Executive Travel	13,750
Total Representative Activities / Services	26,250
Membership Services	
Annual Meeting	6,000
Liability Insurance	6,230
RPN NEWS	1,000
Annual Report	1,000
Public Relations & Awareness	21,600
Total Membership Services	35,830
Total Expenditures Part A	612,780
Expenditures Part B	
Statutory Committees (Legislation, Professional, Conduct, Discipline, Nominations)	5,500
RPNC	5,000
Special Projects/RPNP/Program Approval	20,100
Total Expenditures Part B	30,600
Total Expenditures	643,380

Audited Financial Statements

Registered Psychiatric Nurses Association of Saskatchewan

Financial Statements

December 31, 2015

Registered Psychiatric Nurses Association of Saskatchewan

December 31, 2015

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FRANK E. GARRETT, MBA, CPA, CMA2211 Smith Street
Regina, SK S4P 2P5
Phone: (306) 565-2777
Fax : (306) 565-2633**INDEPENDENT AUDITOR'S REPORT**

April 08, 2016

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, 2015 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 CPA Accounting Standards for Not-for-Profit 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 organization as at December 31, 2015 and the results of its operations and cash flows for the year then ended in accordance with Canadian Accounting Standards for Not-for-Profit Organizations.



Frank E. Garrett MBA, CPA, CMA

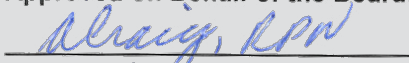

Registered Psychiatric Nurses Association of Saskatchewan

Statement of Financial Position

December 31, 2015

	Note	2015	2014
Assets			
Current Assets			
Cash	2.	\$ 459,990	\$ 497,819
Accounts receivable, net of allowances		9,381	2,800
Prepaid expenses-SHEPP and benefits		3,042	5,620
Total Current Assets		472,413	506,239
Long term investments	6.	449,486	499,486
Property, plant and equipment, net of accumulated amortization		92,562	93,986
Total Assets		\$ 1,014,461	\$ 1,099,711
Liabilities and Shareholders' Equity			
Current Liabilities			
Accounts payable and accrued liabilities	4.	\$ 8,218	\$ 17,652
Deferred revenue	f.	525,724	530,449
Total Current Liabilities		533,942	548,101
Equity			
Contingency Reserve Fund		127,352	127,352
Investment in capital assets		92,562	93,986
Bursary Reserve		48,046	48,046
Unrestricted Net Assets		212,559	282,225
Total Equity		480,519	551,609
Total Liabilities and Equity		\$ 1,014,461	\$ 1,099,710

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 December 31, 2015

	2015	2014
Revenue		
Non-active fees	\$ 3,540	\$ 3,330
Licensing fees	542,898	555,044
Interest income	22,195	17,867
Other revenue	24,969	7,015
Member's liability insurance	6,132	6,153
Administration fees	2,740	4,947
Promotional	1,084	1,546
Total revenue	603,558	595,902
Operating expenses		
Advertising and promotion	3,647	3,742
Council and membership meetings	27,247	19,673
Amortization of tangible assets	2,132	2,255
Employee benefits	44,837	42,089
Insurance-professional liability	7,139	6,285
Insurance-office	3,745	2,575
Interest and bank charges	6,017	4,271
Memberships and licenses	1,270	3,881
Office expenses	17,049	27,099
Professional fees	18,131	11,992
Property taxes	6,982	6,429
Committees	43,958	23,436
Repairs and maintenance	8,497	11,469
Salaries and wages	335,634	303,870
Training	22,381	18,545
Membership development	19,596	18,808
Travel expenses	13,093	10,059
Utilities	9,203	10,322
Donations	660	650
Data processing (Note 9)	35,637	-
Registration and special projects	6,770	10,892
Promotional	7,506	16,199
Discipline hearings and professional conduct	74,544	36,906
Total operating expenses	715,675	591,447

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

Registered Psychiatric Nurses Association of Saskatchewan

Statement of Operations

For the Year Ended December 31, 2015

	2015	2014
Revenue over expenses	\$ (112,117)	\$ 4,455

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 December 31, 2015

	2015	2014
Contributed and other surplus	\$ 282,225	\$ 318,952
Net income (loss)	(112,117)	4,455
Transfers from (to) restricted funds	42,451	(41,182)
Ending Balance-Unrestricted Net Assets	\$ 212,559	\$ 282,225

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

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Registered Psychiatric Nurses Association of Saskatchewan

Statement of Cash Flows

For the Year Ended December 31, 2015

	Note	2015	2014
CASH FLOWS FROM OPERATING ACTIVITIES:			
Cash received from contributions		\$ 550,319	\$ 548,648
Cash received from unrestricted investment income		22,195	17,867
Cash paid for program service expenses		(297,463)	(244,405)
Cash used for Council and Committee expenses		(27,247)	(42,579)
Bursaries and other payments awarded		-	(4,822)
Cash paid to employees		(335,633)	(300,130)
TOTAL CASH FLOWS FROM OPERATING ACTIVITIES		(87,829)	(25,421)
CASH FLOWS FROM INVESTING ACTIVITIES:			
Purchase of long-term investments, net		-	(50,000)
Proceeds on disposal of long-term investments		50,000	62,500
NET CASH USED BY INVESTING ACTIVITIES		50,000	12,500
CASH FLOWS FROM FINANCING ACTIVITIES:			
OTHER ACTIVITIES:			
Cash and cash equivalents at beginning of year		497,819	510,740
Cash and cash equivalents at end of period		\$ 459,990	\$ 497,819

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 December 31, 2015

1. Significant Accounting Policies

a. Nature of business/basis of preparation

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.

b. 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

c. 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.

d. Reserves

Contingency Reserve:

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

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the Year Ended December 31, 2015

1. Significant Accounting Policies continued

d. 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.

e. 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.

f. 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.

g. Use of estimates

The preparation of financial statements in conformity with Canadian Accounting Standards for Not-for-Profit

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the Year Ended December 31, 2015

1. Significant Accounting Policies continued

g. Use of estimates continued

Organizations requires management to make estimates and assumptions that affect the 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

h. 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:

	2015	2014
Bank chequing - domestic currency	\$ 60,953	\$ 397,375
Bank savings-domestic currency	399,037	100,444
Total	\$ 459,990	\$ 497,819

3. Property, plant and equipment

Property, plant and equipment consist of the following:

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the Year Ended December 31, 2015

3. Property, plant and equipment continued

			2015	2014
	Cost	Accumulated Depreciation	Net Book Value	Net Book Value
Land	\$ 38,250	\$ -	\$ 38,250	\$ 38,250
Buildings	141,990	(94,802)	47,188	40,780
Machinery, equipment, furniture and fixtures	91,682	(84,558)	7,124	14,956
Total	\$ 271,922	\$ (179,360)	\$ 92,562	\$ 93,986

4. Accounts payable and accrued expenses

Accounts payable consist of the following:

	2015	2014
Trade accounts payable	\$ 2,107	\$ 2,109
Wages payable	-	5,529
Benefits payables	1,048	5,034
Employee deductions payable	5,063	4,980
Total	\$ 8,218	\$ 17,652

5. 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.

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the Year Ended December 31, 2015

5. Credit risk continued

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

6. Long-term investments

	2015	2014
Cash	\$ 75,443	\$ 74,178
Colabor Group Inc Due 04/30/2017 @ 5.700%	50,000	50,000
Crombie Real Estate Inv Due 03/31/2021 @ 5.250%	30,000	30,000
First Capital Realty Inc. Due 02/28/2020 @ 4.450%	50,000	50,000
ING Floating Rate Senior Loan CL A unit	-	91,745
Inn-vest Real Estate Due 03/31/2019 @ 6.250%	50,000	50,000
Pengrowth Energy Debs Due 03/31/2017 @ 6.250%	50,000	50,000
Zargon Oil & Gas Due 06/30/2017 @ 6.000%	50,000	50,000
Province of Manitoba Due 12/03/2015 @ 5.200%	-	50,030
VOYA floating rate	86,977	-
Equity	5,720	3,533
Total	\$ 448,140	\$ 499,486

7. 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 \$ 15,691 for the year (December 2014 -\$19,285).

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

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the Year Ended December 31, 2015

7. Pension continued

Contribution rates are as follows:

December 31, 2015 -8.14% (December 31, 2014 -8.10%) of pensionable earnings up to the yearly maximum earnings (CPP) plus 10.70% (December 31, 2014 - 10.70%) of pensionable earnings above the yearly maximum earnings (CPP).

8. Commitments

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

2015	9,036
2016	9,036

9. Data Processing

Helsby Drake (formally ORIGAMI) was a necessary expense approved by council in 2014 to streamline and modernize the way the Organization operates. The company was contracted to complete the project for the Association. Since the project went live in 2015, it has introduced some cost savings, reduce the administrative burden of processing renewals and allows for improved digital record keeping. The project is not yet finished, and will continue into 2016 with approximately additional \$ 25,000 in related costs.



Annual General Meeting

& Education Days
June 9-10, 2016

Hosted At:
Sheraton Cavalier Saskatoon
612 Spadina Crescent East
Saskatoon, SK S7K 3G9



EVENT SCHEDULE

Thursday, June 9th, 2016

Education Day - South West Conference Room

7:00 AM - 8:00 AM	Registration & Continental Breakfast
8:00 AM - 8:15 AM	Welcome, Introductions & Day Briefing
8:15 AM - 9:45 AM	Social Networking - Implications for Professional Practice - Ryan Shymko (Pg 3)
9:45 AM - 10:15 AM	BPN Degree Program
10:15 AM - 10:30 AM	Coffee Break - Sponsored by Saskatchewan Polytechnic
10:30 AM - 12:00 PM	Social Networking continued
12:00 PM - 1:00 PM	Lunch
1:00 PM - 2:30 PM	Saskatoon Police Service - Gang Squad (Pg 3)
2:30 PM - 2:45 PM	Coffee Break - Sponsored by the Saskatchewan Union of Nurses
2:45 PM - 3:45 PM	Saskatoon Police Service - Drug Squad
3:45 PM - 4:30 PM	Bikers Against Child Abuse (BACA) (Pg 4)
4:30 PM - 6:00 PM	Break

President's Award Banquet - Top of the Inn (Top floor)

6:00 PM - 6:45 PM	Social (cash bar available)
6:45 PM - 8:15 PM	Dinner & Entertainment
8:15 PM - 9:00 PM	Award Presentations

Friday, June 10th, 2016

Education Day - South West Conference Room

7:30 AM - 8:30 AM	Registration & Continental Breakfast
8:30 AM - 8:45 AM	Welcome & Day Briefing
8:45 AM - 10:30 AM	Paula Meyer - Legal Nurse Consultant (Pg 4)
10:30 AM - 10:45 AM	Coffee Break
10:45 AM - 12:30 PM	Paula Meyer continued
12:30 PM - 1:30 PM	Lunch
1:30 PM - 4:30 PM	Annual General Meeting



Bikers Against Child Abuse (BACA):

Bikers Against Child Abuse (B.A.C.A.) exists with the intent to create a safer environment for abused children. They exist as a body of Bikers to empower children to not feel afraid of the world in which they live. They work in conjunction with local and state officials who are already in place to protect children and desire to send a clear message to all involved with the abused child that this child is part of their organization, and that they are prepared to lend their physical and emotional support to them by affiliation and physical presence. They stand at the ready to shield these children from further abuse. They do not condone the use of violence or

physical force in any manner, however, if circumstances arise such that we are the only obstacle preventing a child from further abuse, they stand ready to be that obstacle.



LEGALITIES OF REGISTERED PSYCHIATRIC NURSING, NURSING SELF CARE & THE NURSING HIERARCHY, NAVIGATING TOXIC WORKPLACES AND DEALING WITH TOXIC CO-WORKERS

Paula Mayer is VP of the first Legal Nurse Consulting Corporation in Saskatchewan, Mayer LNC, founded in 2011. Paula has 23 years of Registered Nursing experience in Canada and throughout the U.S. She is a former Certified Emergency Nurse, and has clinical experience as well in Long Term Care,

General Medicine, Palliative Care, Surgery, and all aspects of Cardiac care. She has practised in virtually every domain of nursing: management, education, research, private practise, and clinical nursing. She is currently a part time instructor in the Continuing Care Assistant (CCA) program at Saskatchewan Polytechnic, and maintains a casual floor position at Regina General Hospital Emergency Room.

After providing expert opinion on a number of LNC cases, Paula and her husband Chris found that poor communication and impaired working relationships were playing a role in nursing malpractice. After extensive independent research and further education on the subject, she created a workshop series to educate nurses and other healthcare professionals about their legal risks and responsibilities. Paula now hosts workshops for healthcare professionals on a variety of topics relating to her work as a Legal Nurse Consultant (LNC). She presents on such topics as legal risks in nursing, legalities of healthcare, nursing self-care, nurse violence, bullying, navigating the toxic workplace, compassion fatigue, and other related topics.



Rules of Order for Annual General 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.)

Statement of Purpose of Annual General 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 RPNews. 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.

AGM Agenda	
1	Call to Order
2	President’s Remarks
3	Procedures for the Annual Meeting
4	Executive Director’s Report
5	Financial Report
6	Resolutions
7	Open Forum
8	Council Elections
9	Installation of Officers
10	Closing Remarks
11	Adjournment

Proposed Bylaw Changes & Resolutions

The following pages include bylaw changes and resolutions for your review. This same information was included in the 2015 Annual Report as well as being distributed by ordinary mail to members on May 6, 2016.

RESOLUTION 1

RESOLUTION TO AMEND THE RPNAS REGULATORY BYLAWS

Regulatory bylaws are effective the date(s) they are signed by the Government of Saskatchewan.

Be it resolved that The RPNAS Regulatory Bylaw X, Section 2, 4 (a) is repealed and replaced with:

1. Arrange to have forwarded by an organization approved by council to the registrar:
 - i. A certified copy of records outlining the theory and clinical content of the program and
 - ii. A statement indicating successful completion of the program

Existing Bylaw	Proposed Amendments	Explanation
Regulatory Bylaws BYLAW X - REGISTRATION Section 2, 4 (a) (i), (ii) Section 2 Initial Registration as a Practising Member 4 A person who has satisfactorily completed a psychiatric nursing education program outside of Canada must, in addition to meeting the requirements of sections 2(1) and 3(1): (a) arrange to have forwarded by the director of the program to the registrar:	Regulatory Bylaws BYLAW X - REGISTRATION Section 2, 4 (a) (i), (ii) Section 2 Initial Registration as a Practising Member 4 A person who has satisfactorily completed a psychiatric nursing education program outside of Canada must, in addition to meeting the requirements of sections 2(1) and 3(1): (a) arrange to have forwarded by an organization approved by council to the registrar:	With the introduction of the National Nursing Assessment Service (NNAS), applicants forward the necessary education information including theory and clinical content of the program and a statement of program completion directly to NNAS. After an initial assessment, NNAS will then forward that information to the registrar for review.

Existing Bylaw	Proposed Amendments	Explanation
<p>(i) a certified copy of records outlining the theory and clinical content of the program; and</p> <p>(ii) a statement indicating successful completion of the program;</p> <p>(b) provide evidence of initial registration and good standing in the jurisdiction where the person completed an approved psychiatric nursing education program;</p> <p>(c) provide evidence of registration and good standing in the jurisdiction where and when the person last practised psychiatric nursing;</p> <p>(d) meet the English language requirement set by the association; and</p> <p>(e) meet the examination requirement for registration.</p>	<p>(i) a certified copy of records outlining the theory and clinical content of the program; and</p> <p>(ii) a statement indicating successful completion of the program;</p> <p>(b) provide evidence of initial registration and good standing in the jurisdiction where the person completed an approved psychiatric nursing education program;</p> <p>(c) provide evidence of registration and good standing in the jurisdiction where and when the person last practised psychiatric nursing;</p> <p>(d) meet the English language requirement set by the association; and</p> <p>(e) meet the examination requirement for registration.</p>	

RESOLUTION 2

RESOLUTION TO AMEND THE RPNAS ADMINISTRATIVE BYLAWS

Administrative bylaws are effective the date(s) they were approved by council.

Whereas RPNAS must amend the Administrative Bylaws as necessary;

Whereas the Association has moved to a digital platform and changes are necessary in the RPNAS Administrative Bylaws to allow for full use of these systems;

THEREFORE, Be it resolved that the amendment to bylaws II 2(1), II 2(2), III 3(1), III 3(2), III 4(2) and IV 5(1)(b) of the RPNAS Administrative Bylaws are set out in the included three-column amendment approved by RPNAS Council on March 6, 2016 and April 14, 2016 and is hereby confirmed by the members of RPNAS present at the Annual General Meeting as required by subsection 14(2) of the Registered Psychiatric Nurses Act, 1993.

Existing Bylaw	Proposed Amendments	Explanation
<p>Administrative Bylaws</p> <p>BYLAW II – ELECTIONS</p> <p>Section 2 – 1, 2</p> <p>Section 2 Voting</p> <p>1 Voting for elected members of the council shall be by ballot mailed to practising members at least 30 days prior to the first day of the annual meeting.</p> <p>2 All ballots shall be held 30 days following the election and then destroyed.</p>	<p>Administrative Bylaws</p> <p>BYLAW II – ELECTIONS</p> <p>Section 2 – 1, 2</p> <p>Section 2 Voting</p> <p>1 Voting for elected members of the council shall be by physical or secure digital ballot, sent to practising members at least 30 days prior to the first day of the annual meeting.</p> <p>2 Physical ballots shall be held 30 days following the election and then destroyed. Digital ballots will be stored for 30 days and then permanently deleted.</p>	<p>Practicing members with voting rights (as prescribed within BYLAW IX - Membership, Section 2, (c) “to vote and hold office at the branch and provincial levels”) are required to access a secure member-only website to maintain their license. The members were authenticated by use of activation codes mailed to home addresses on file.</p> <p>The same or similar secure service can be used to record votes by each individual. This will eliminate miscounts, potentially increase voter turnout and reduce the administrative burden.</p>
<p>Administrative Bylaws</p> <p>BYLAW III – MEETINGS OF THE ASSOCIATION</p> <p>Section 1 – 1, 2</p> <p>Section 1 Annual Meeting</p> <p>1 Notice of the annual meeting shall be printed in the association newsletter at least two months prior to the date of the meeting.</p> <p>2 The annual report shall be mailed to members of the association at least 14 days prior to the date of the meeting.</p> <p>3 Council shall establish the rules and procedures for the conduct of the meeting.</p>	<p>Administrative Bylaws</p> <p>BYLAW III – MEETINGS OF THE ASSOCIATION</p> <p>Section 1 – 1, 2</p> <p>Section 1 Annual Meeting</p> <p>1 Notice of the annual meeting shall be included in the association newsletter at least two months prior to the date of the meeting.</p> <p>2 The annual report shall be sent to members of the association at least 14 days prior to the date of the meeting</p> <p>3 Council shall establish the rules and procedures for the conduct of the meeting.</p>	<p>All active members provided e-mail addresses to the Association upon renewal or initial registration.</p> <p>As a result, the annual report can be delivered quickly and reliably to all members by e-mail, all while reducing the administrative burden of volume printing and distribution.</p> <p>If a member wishes to receive a paper copy by mail it can be requested.</p>

Existing Bylaw	Proposed Amendments	Explanation
<p>Section 4 Voting</p> <p>1 All questions voted on at a meeting of the association, except as otherwise specified for Bylaws in The Registered Psychiatric Nurses Act, section 15, and Bylaw XVI, shall be decided by a plurality of the votes of the practising members present. Each voting member shall be entitled to one vote.</p> <p>2 Eligibility to vote at a meeting of the association shall be determined by presentation of a current practising membership card.</p> <p>3 All ballots shall be destroyed following a meeting of the association.</p>	<p>Section 4 Voting</p> <p>1 All questions voted on at a meeting of the association, except as otherwise specified for Bylaws in The Registered Psychiatric Nurses Act, section 15, and Bylaw XVI, shall be decided by a plurality of the votes of the practising members present. Each voting member shall be entitled to one vote.</p> <p>2 Eligibility to vote at a meeting of the association shall be determined by presentation of verification of identity as a practising member.</p> <p>3 All ballots shall be destroyed following a meeting of the association.</p>	<p>Paper licenses are no longer issued. Eligibility can be determined in person with identification and use of our online member register.</p>
<p>Administrative Bylaws</p> <p>BYLAW IV – FEES</p> <p>Section 5, 1 (b)</p> <p>Section 5 Other Membership Fees</p> <p>1 Membership fees associated with all other categories of membership shall be:</p> <p>(a) for non-practising membership, fifty dollars per membership year;</p> <p>(b) for student membership, five dollars per membership year;</p> <p>(c) for associate membership, fifty dollars per membership year; and</p> <p>(d) for honorary and life membership, no fee will be charged.</p>	<p>Administrative Bylaws</p> <p>BYLAW IV – FEES</p> <p>Section 5, 1 (b)</p> <p>Section 5 Other Membership Fees</p> <p>1 Membership fees associated with all other categories of membership shall be:</p> <p>(a) for non-practising membership, fifty dollars per membership year;</p> <p>(b) for student membership, no fee will be charged;</p> <p>(c) for associate membership, fifty dollars per membership year; and</p> <p>(d) for honorary and life membership, no fee will be charged.</p>	<p>Allowing students to become members with no consideration required should increase student membership and engagement with the Association.</p>

RESOLUTION 3

RESOLUTION TO INCREASE MEMBERSHIP FEES

Whereas costs for the association continue to rise with increased costs in property taxes, salaries, travel, legal and committee expenses.

Whereas the membership of the association is predicted to decrease with retirements and investments are required to attract new RPNs.

Whereas previous fee increases covered only the cost of inflation.

Whereas the association has made every possible effort to reduce operating costs by in-sourcing various services.

THEREFORE, be it resolved that annual membership fees will increase \$95 in 2017.

Moved: RPNAS Council

RESOLUTION 4

MOTION FROM THE SPECIAL MEETING ON MARCH 31, 2016

Call upon the RPNAS to advocate publicly for RPN scope of practise. To formally register concern with SALPN bylaw changes. To promote the role of RPNs in the media, to promote the role of RPNs in the media, and increase the public awareness of RPNs in the Government by requesting a meeting.

Moved: Catherine Watson

Seconded: Leslie Saunders

RESOLUTION 5

MOTION FROM THE SPECIAL MEETING ON MARCH 31, 2016

Whereas RPNAS work with SALPN and SRNA to develop a role clarity document that clearly distinguishes the differing role and function of each category of nursing care provider, which must include:

1. RPNs coordinate care;
2. RPNs are responsible for appropriate assignment and delegation of patient care;
3. RPNs care for clients from stable and predictable to highly complex and unpredictable;
4. RPNs are not able to be replaced with other care providers.

Moved: Pat Smith

Seconded: Elwood Haydalo

RESOLUTION 6

MOTION FROM THE SPECIAL MEETING ON MARCH 31, 2016

The RPNAS develop interpretive documents that clearly outline and support RPN practice. Post these documents on the RPNAS website, social media and other medias.

Moved: Catherine Watson

Seconded: Roberta Jors

**This publication and others are available on our website
www.rpnas.com**



**REGISTERED
PSYCHIATRIC
NURSES
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SASKATCHEWAN**

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