## Our Mission:

"To protect the public and to support nurses by promoting and maintaining nursing standards and by advocating for our members through consultation, education and community building."



The Registered Nurses Association of the Northwest Territories and Nunavut 2015 Annual Report

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## Mandate, Mission, Vision and Principles

The RNANT/NU Board of Directors held a strategic planning session in April, 2015 where a new mandate, mission, vision and principles were developed. These statements and the finalized 2015-2018 strategic plan were approved September 21, 2015.

## Mandate

The creation, enforcement and promotion of policy to protect the public and advocacy to support nurses through member engagement, leadership and relevance.

### Mission

To protect the public and to support nurses by promoting and maintaining nursing standards and by advocating for our members through consultation, education and community building.

### Vision

Excellence in nursing for the Northwest Territories and Nunavut.

## **Principles**

The Registered Nurses Association of the Northwest Territories and Nunavut acts in accordance with the following principles:

- Integrity
- Accountability
- Collaboration
- Inclusion
- Transparency.

## **President's Message**

It has been a privilege to be part of the RNANT/NU for the past four years as the President & Chair of the Board of Directors. In the past four years, your Board of Directors have been at work fulfilling its governance role.

Much work has gone into reviewing and updating our policies as they are the foundation of our decision making. The board met in caucus and penned a strategic plan for 2015 – 2018. We became compliant with federal acts by outlining the guidance and education requirements for nurse practitioners to prescribe narcotics and control substances. Other documents that were reviewed and adopted include *The Entry to Practice Competencies for RNs* and the *Practice and Prescriptive Guidelines for NPs*.

I would like to thank the members of the Association and public who served on the Board of Directors and/or other RNANT/NU Committees. There are three main areas in which the RNANT/NU works to protect the public interest: Practice, Education, & Discipline. Our members volunteer their time to assist the Association with the functions of our regulatory body. Our volunteers sit on the following committees

- 1) Registration Committee
- Nursing Practice Committees (an RN practice committee and an NP practice committee

- 3) Education Advisory Committee
- Professional Conduct Review Committee.

An example of the work of our staff and our committees include the investigation of professional conduct complaints, the development of position statements and standards of practice. Staff worked hard in 2015 to introduce a new website, a part of which is access to a database where the public can identify a member's credentials and standing as a professional.

Our staff patiently lived through some construction to update the physical work space of the RNANT/NU offices. On this note I will end by planting an idea in the minds of our Board of Directors and the public alike. I think it may be time for our Association to consider owning its own building and facilities. Our Association started with a small group of dedicated professionals committed to the idea of self-regulation. Some of the first meetings were held in the homes of staff and board members. We have come a long way. Your new president & board members will continue with the first duty which is to protect the public safety through self-regulation.

Regards Rob Nevin

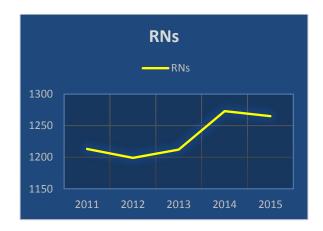
## **Executive Director Report**

In 2015, RNANT/NU celebrated its 40<sup>th</sup> year as an organization. The Association, originally named the Northwest Territories Registered Nurses Association of (NWTRNA), was incorporated in 1975. Membership was voluntary and the Associations' documents were housed in volunteers' homes. Its membership totalled 60 by the end of the year.

RNANT/NU has grown and evolved over the last 40 years. In 2015, membership was 1,314 and RNANT/NU employed three registered nurses and two administrative employees. With the growth, the commitment of our volunteer members and representatives has remained public consistent over the years. The annual report provides an overview of the regulatory and advocacy work performed by the employees and volunteers on behalf of the people of the Northwest Territories (NT) and Nunavut (NU) and the RNANT/NU members.

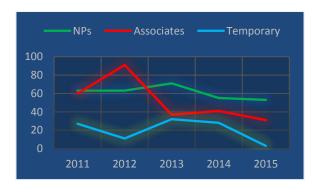
Registration is one of three regulatory functions performed by the Association. Registration acts include maintaining nursing and nurse practitioner registers, developing competencies and standards and ensuring the continuing competency of our active practicing members. The nursing and nurse practitioner registers are maintained through the initial and annual renewal of all registered nurses and nurse practitioners practicing in the NT and NU. The following

graph provides registration statistics for the last five (5) years:



The number of RNs with active practicing licenses has increased by approximately 50 members over the last two years.

## NPs, Associates & Temporary



The number of NPs registered with RNANT/NU has decreased by approximately 10 over the last five years. Applications for temporary licenses significantly decreased in 2015. This reduction was attributed to graduates receiving the results of the NCLEX-RN, the RN entry to practice exam within 48 hours of writing the exam.

As noted in last years' report and the Fall edition of the RNANT/NU newsletter, the Continuing Competence Program is a key part of the registration process. Legislation requires all active practicing members to be competent in the practice of nursing. Hours of practice and ongoing professional development are two key factors in determining the competence of members applying for initial licensure and licence renewal. The completion of a professional development plan or continuing competency plan has been a requirement for registration since 2004.

Per Bylaw 4 Continuing Competence, a random audit of ten percent of our members' continuing competency plans (CCPs) was conducted in the spring of 2015. Of the members audited, 92% submitted their 2014 CCP for audit on or before the requested deadline while 8% failed to submit. The CCPs submitted by members were reviewed by the RNANT/NU Registration Committee for content, completeness and adherence to the Standards of Practice. 51% were satisfactory and 49% were unsatisfactory. These results indicated members' required education on how to complete their CCP. Members with unsatisfactory CCPs were offered assistance and in-services were planned for 2016. Of the 8% of audited members who failed to initially submit their CCP, all but two members eventually complied with the audit request. Per the Nursing Profession Act professional (2003),complaints of misconduct were made against the two members who failed to submit 2014 CCPs for the audit in 2015. All members are encouraged to read the following documents available on the RNANT/NU website: Bylaw 4 Continuing Competence, and Registration Policies R11 Continuing Competence Plan and R12 Continuing Competence Plan Audit.

Another component of continuing competency is demonstrating jurisprudence competence. Jurisprudence competence is an understanding of the laws and standards that govern your nursing practice. This year, the Registration Committee began developing a jurisprudence learning module for our members.

Professional conduct review is the second of three regulatory functions performed by the Association. The number of complaints received by the association and accepted by the Chairs of the Professional Conduct Committee has been consistent over the last three years (see below chart). However, like acuity in clinical practice areas, the complexity of a complaint often determines workload.



All substantiated complaints against RNANT/NU members resolved in 2015 were

done through an alternate dispute resolution process. The graph below provides a statistical summary of professional conduct during 2014 and 2015.



Nursing education programs in a jurisdiction or province/territory must be approved to ensure they meet prerequisites registration. This approval process is the third regulatory function performed by RNANT/NU. This function is performed by the Education Advisory Committee (EAC) with operational support from the Director of Regulatory Services and Policy, Michelle Brisco. A full program review of the Nunavut Arctic College BScN Program was conducted The Board of Directors in late 2014. approved the recommendations of the EAC regarding the review in 2015.

In 2015, graduates of Nunavut Arctic College and Aurora College BScN Programs wrote the new RN entry to practice examination, NCLEX-RN. Results for graduates from the NT and NU were a first attempt pass rate of 84.2% and an ultimate pass rate of 94.7%. The ultimate pass rate indicated graduates who had passed by the end of 2015 after one or more attempts.

Operation goals for 2015 included the development of a new website; a review and revision of the continuing competence plan process; and document management. Work on a new website and database began in the fall of 2015. The website will be linked to the database registration allowing our members, employers and the public to check the registration and professional standing of our active practicing members. The new website similarly provides user friendly access to the public about the professional conduct process. Access to the public register and the professional conduct process increases the Associations accountability to the public. The framework of the website will also allow for future additions including online registration and portals for committee work.

Revisions were made to the professional development plan process in early 2015 including renaming it to align with the language used in the Nursing Profession Act. The primary purpose of the revisions was to provide clarity for members. As previously noted, the 2015 audit of continuing competency plans (CCPs) demonstrated a lack of knowledge regarding the CCP process.

Document management continues to be an ongoing action item. Office space was reconfigured to allow for additional storage

of registration records. Purging of select records will take place in 2016.

RNANT/NU employees continue to participate in a number of territorial and national committees, working groups and These committees include the projects. Aurora College BScN Advisory Committee, the NCLEX-RN Operational Lead Working Group, the Canadian Council of Registered Nurse Regulators (CCRNR) regarding regulatory matters and the Canadian Nurses Association (CNA) for matters pertaining to professional practice, policy and advocacy. RNANT/NU has been an active participant in the NP Practice Analysis Project.

RNANT/NU volunteers also serve on national committees. They are members of the CNPS Board of Directors, the Nurse Practitioner Council for Canadian Association of Advanced Practice Nurses (CAAPN) and the Board of Directors for the Canadian Federation of Mental Health Nurses. In

2015, Sheena Gettis and Karen Brown served as item reviewers for the NCLEX-RN exam.

Professional advocacy work continues. Meetings were held with the Deputy Minister of Health and Social Services for the NT, Debbie Delancey and the Deputy Minister of Health for NU, Colleen Stockley. Regular meetings have been established with the chief nursing officers for both territories. RNANT/NU Directors and I have attended the NT Northern Leadership Forum to share information and RNANT/NU participated in the Mental Health Action Plan round table discussion group.

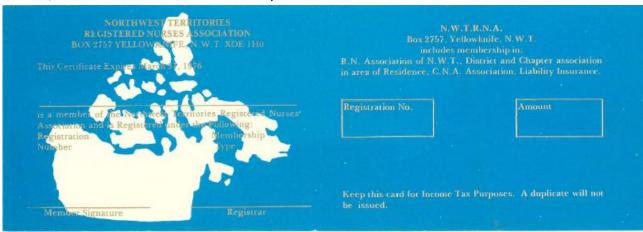
I would like to thank the RNANT/NU staff and volunteers for their contributions to the work accomplished by the Association in 2015.

Donna Stanley-Young Executive Director



## 2015 RNANT/NU Highlights

RNANT/NU celebrates its 40<sup>th</sup> Anniversary



First Registration Card 1975

- First Position Statement for registered nurses and nurse practitioners working with and delegating to unregulated healthcare providers published January 2015.
- Annual General Meeting (AGM) and Activities

  The 2015 AGM was held in Yellowknife and began with education sessions on April 23<sup>rd</sup> and 24<sup>th</sup>.





The Annual General Meeting took place on the afternoon of April 25<sup>th</sup>. The agenda included: an update on CNA activities by Barb Shellian, CNA President-Elect; a review of the 2014 Financial Statement; approval of the firm Avery Cooper and Co. as the auditor for the 2015 fiscal year; and approval of amendments to Bylaws 2,3,4,11,17, and 20.

Following the AGM, CNPS legal advisor, Mandy Lawson gave a presentation on personal health information and e-professionalism.





The members' banquet was held on the evening of April 25<sup>th</sup> and closed the AGM activities. Greetings were offered from the Honourable Minister of Health and Social Services for the Northwest Territories, Glen Abernethy and the Canadian Nurses Association.





Social Media Position Statement published April 2015.

Larry Thompson received the First Nations and Inuit Health Branch Award of Excellence in Nursing.



- Continuing Competency Program reviewed and revised.
- Practice and Prescriptive Guidelines for Nurse Practitioners reviewed and revised.
- 32 Association policies were reviewed, revised and/or developed.
- 1,055 registration renewal applications were processed from October 1<sup>st</sup> to December 31<sup>st</sup>, 2015



## **RNANT/NU Annual Committee Reports**

## **Professional Conduct Review Committee**

#### **Committee Members**

The Professional Conduct Committee members' names have traditionally not been published.

## **Committee Purpose/Mandate**

The purpose of the Professional Conduct Committee is to receive and manage complaints alleging professional misconduct by a Registered Nurse or Registered Nurse Practitioner practicing in the Northwest Territories or Nunavut.

#### Meetings

The Chairpersons meet monthly with the Director of Professional Conduct. The purpose of these meetings is to make new and subsequent decisions regarding complaints received and accepted. Also, the Chairpersons are provided with information regarding the progress of other complaints that are either through the Alternate Dispute Resolution Settlement Agreement, an Interim Panel Review or a Board of Inquiry. The Chairpersons give direction regarding the undertakings in a settlement agreement.

## **Activities/Projects**

The key activity of this committee is to process complaints of professional misconduct. The goal is to bring the complaint to a resolution either through a

Settlement Agreement or Board of Inquiry. The mandate is to protect the public, therefore the Chairpersons make decisions regarding the member's ability to practice safely and competently. If there is a question regarding a member's practice, then the Chairpersons consider the need for placing conditions on a license or for suspending a license.

## Challenges/Accomplishments

We are a small jurisdiction with a transient workforce that are employed in many communities in advanced roles with acute and complex care needs. Along with this context, the environment of health care is becoming more litigious or it could be that we are more transparent and educative about the management of complaints. Regardless, the volume and extensiveness of the investigative work required is increasing the workload of the Director of Professional Conduct and subsequently the Professional Committee Members. Conduct Investigations are often long and detailed. The gathering of evidence is conducted within a milieu of processes that at times delay and prolong the investigation. For example, there is a new Health Information Act in the Northwest Territories.

#### Recommendations

There is a need to increase the Director of Professional Conduct position to a full time

status and to provide administrative support.

Respectfully submitted
Chair, Professional Conduct Review

## **Education Advisory Committee**

## **NT Representatives**

Debora Simpson (Chair) – Manager Adult and Post-Secondary Education, ECE, Yellowknife, NT Yves Panneton – Department of Health, GNWT, Yellowknife, NT (until October 2015) Kate Thompson – Department of Health, GNWT, Yellowknife, NT (joined in October 2015) Tony Florio – Public Representative, Yellowknife, NT

### **NU Representatives**

Sheila Levy – Public Representative, Iqaluit, NU Pallulaaq Ford, RN – Department of Health, GN, Rankin Inlet, NU Nicola Sims- Jones, RN – Public Health, Iqaluit, NU

Karyn Unrau, RN – Director of Regulatory Services and Policy, RNANT/NU Liaison (until June 2015)

Michelle Brisco, RN – Director of Regulatory Services and Policy, RNANT/NU Liaison (joined in July 2015)

### **Committee Purpose/Mandate**

The Education Advisory Committee is established in accordance with the Northwest Territories Nursing Profession Act (2003). The committee is responsible for evaluating and making recommendations to the RNANT/NU Board of Directors for changes to the following: (a) standards for nursing education, (b) nursing education programs, and (c) the process for approval of nursing education programs. The committee also is responsible for performing any other tasks relating to nursing education which are

referred to it by the RNANT/NU Board of Directors.

#### Meetings

Meetings are held quarterly or as required by the Registrar. In 2015, the committee held 5 meetings.

### **Activities/Projects**

 In early 2015, the committee focused on the Approval Process for the NAC Nursing Program.

- In the spring of 2015, the committee reviewed the Annual Reports submitted by Nunavut Arctic College and Aurora College.
- In the summer of 2015 and throughout the fall, the committee focused on revising the Approval Process for Nursing Education Programs Leading to Registration as a Registered Nurse. This work is ongoing in 2016.

## **Challenges/Accomplishments**

 The main challenges for the committee are filling vacant committee positions as well as member availability for meetings.

## Recommendations

 Going forward, continued advice and direction from the RNANTNU Board of Directors would be most appreciated.

Submitted by: Debora Simpson on behalf of the EAC

## **Registration Committee**



Committee Members left to right: Vee Faria, Donna Allen, Linda Koe, Candy Grimm, Kera Misling and Sheila Laity.

#### **Committee Members**

Candy Grimm, RN - Nurse Practitioner, Yellowknife, NT

Lynda Koe, RN – Care Supervisor, AVENS: A Community for Seniors, Yellowknife, NT

Kera Misling, RN – Staff Nurse, Stanton Territorial Hospital, Yellowknife, NT

Jacqueline Green, RN – Nurse Practitioner, Rankin Inlet, NU (until December 2015)

Erin Wagner, RN – Staff Nurse, Stanton Territorial Hospital, Yellowknife, NT

Sheila Laity, RN - Nurse Practitioner, Yellowknife, NT

Chris Nolan, RN - Hall Beach, NU

Esther Powell, RN - Rankin Inlet, NU

Lori Baggs – Public Representative, NT (until September 2015)

Donna Allen, RN – Department of Justice, Yellowknife, NT (joined in September 2015)

Vee Faria, RN – Instructor, Aurora College, Yellowknife, NT (joined in September 2015)

Karyn Unrau, RN – Director of Regulatory Services & Policy, RNANT/NU Liaison (until June 2015) Michelle Brisco, RN - Director of Regulatory Services & Policy, RNANT/NU Liaison (joined in July 2015)

## **Committee Purpose/Mandate**

The committee met eight times in 2015. The committee made recommendations to the Board of Directors regarding registration requirements and fees, granting of temporary certificates, registration policies, and recognition of entry to practice examinations for RNs and NPs. As well, they reviewed all submitted Continuing Competence Plans (CCPs) submitted by members.

### **Activities/Projects**

1. Registration:

Temporary Certificates: 3 Registration Violations: 6 Registration Appeals: 0

Assessment of Practice Hours: 6

2. Early in the year the committee turned its attention to the definition of nursing and the assessment of nursing hours

for credit towards mandatory practice requirements. The results of several months of discussion was the creation of two new policies; Registration Policy R8 – Definition of Nursing, and Registration Policy R9 – Practice Hours for Registered Nurses and Nurse practitioners.

3. The committee also worked on the development and implementation plans for a jurisprudence model that will be mandatory for all our members. The module will focus on helping nurses working in the NT and NU understand our statutes, standards, polices, and nursing context. Most jurisdictions across Canada feel this content is very important for competent nursing practice in a given setting. With regards to the development of a jurisprudence learning module, during 2015 the committee focused on gathering information from other jurisdictions and

considering how we can develop a program for our members that is appropriate for our context and can be delivered in a way that is accessible for all members.

## **Challenges/Accomplishments**

1. Continuing Competence Program

The committee reviewed 94 CCPs for 2014 and, again, the number submitted that did not meet the requirements was a concern for the committee.

Response rate: (94/102) 92% Satisfactory submissions: 48 Unsatisfactory submissions: 46

Complaints filed for non-compliance: 2

The registrar spends a significant amount of time helping members to understand the requirements for our Continuing Competence Program. Thus, the committee decided that having more examples of satisfactory CCPs might help our members to easily access information on what is required. The committee reviewed a number of acceptable CCPs that had been submitted to our office and the registrar contacted the authors of two for permission to use their CCP as examples. The committee and registrar also wrote an article for the newsletter and the registrar highlighted the main components of a CCP on our website. In addition, the Registrar planned to offer some education sessions on CCPs early in 2016 for all members of the Association. These will be offered several times, both in person and by teleconference,

to maximize opportunities for participation by members.

The committee also was concerned with a few nurses who, despite repeated reminders and requests, never submitted their CCPs for the 2014 year (spring audit 2015). These nurses submitted a renewal package for 2016 but the Registrar was unable to approve their registration renewal due to their non-compliance with the Continuing Competence Program. This left the committee questioning what should be done in this situation and how to best avoid such a situation in the future. This is something the committee will work on during 2016.

## 2. Registration Violations

Registration Violations continue to be a problem, especially with the high turnover and reliance on locum nurses.

Recruiting and maintaining committee members, especially those representing NU continues to be a challenge for the committee.

#### Recommendations

The committee would like to acknowledge and thank RNANT/NU staff for their ongoing support and commitment throughout the year. Thank you to all Committee members for their dedication, expertise, and input.

Respectfully Submitted, Donna Allen, RN

## **RN Practice Committee**



Committee Members front row left to right: Lydia Montana and Sarah Brenton. Back row: Brianne Timpson, Carol Amirault, Catherine Dixon, Natasha Bursey and Jacqueline De Courtere.

#### **Committee Members**

Brianne Timpson, RN – Manager, Quality and Risk Assurance, STHA, Yellowknife, NT (Chair) Carol Amirault, RN – Nursing Instructor, Aurora College, Yellowknife, NT Natasha Bursey, RN – Nursing Instructor, Aurora College, Yellowknife, NT Mary-Ann Hannaford, RN – Community Health Nurse, Fort Simpson, NT Jacqueline DeCoutere, RN – Public Health Nurse, Yellowknife, NT Catherine Dixon, RN – Staff Nurse, Stanton Territorial Hospital, Yellowknife, NT Sarah Brenton, RN - Public Health Nurse, Yellowknife, NT Elissa Sakariassen, RN - Nursing Instructor, Nunavut Arctic College, Iqaluit, NU Anita Robertson, RN – Nursing Instructor, Nunavut Arctic College, Iqaluit, NU Lydia Montana, RN – Staff Nurse, AVENS: A Community for Seniors, Yellowknife, NT Karyn Unrau, RN – Director of Regulatory Services and Policy, RNANT/NU Liaison (until June 2015)

Michelle Brisco, RN – Director of Regulatory Services and Policy, RNANT/NU Liaison (joined in July 2015)

#### **Committee Purpose/Mandate**

The purpose of the RN Practice Committee is to identify emerging nursing practice issues of concern to Registered Nurses in the Northwest Territories (NT) and Nunavut (NU). With the RNANT/NU Board of Director's support, the committee is able to research and respond to nursing practice issues through consultation and development of various documents; such as position statements, practice guidelines, and standards of practice.

### Meetings

The expectation of the RN Practice Committee is to meet monthly, except during the summer months (specifically July and August). In 2015, the Committee held 7 meetings.

## **Activities/Projects**

- In early 2015, the committee began drafting a position statement on social media. Approved by the RNANT/NU Board of Directors and released in May 2015, this position statement promotes the responsible use of social media by RNs and NPs in the NT and NU, while outlining the benefits and risks of using social media and identifying the responsibilities of RNs and NPs who participate in social media activities.
- In early fall 2015, the committee began working on updating the current Scope of Practice for RNs in the NT and NU. To date, the committee has engaged in a jurisdictional review of documents

pertaining to scope of practice both nationally and internationally and has started drafting the new Scope of RN Practice. The committee will continue to work on this project in 2016.

## **Challenges/Accomplishments**

- Position Statement Social Media (released in May 2015). The statement is available on the RNANT/NU website.
- In October 2015, two fourth year nursing students from Nunavut Arctic College observed committee meetings to learn more about the RNANT/NU and leadership in nursing.
- Membership on the committee continues to be representative of various areas of nursing practice in the NT and NU.

### Recommendations

- Finalize the Scope of Practice for Registered Nurses in the NT and NU. Distribute the final draft to the RNANT/NU Board of Directors for review and approval by the end of 2016.
- Consider reviewing the Scope of Practice for Registered Nurses (updated in January 2010).
- Continue to recruit, as needed, new committee members from both jurisdictions who work in various areas of practice.

As committee chair, I want to sincerely thank all committee members for continuing to

volunteer their time and expertise to the RN Practice Committee. In 2015, the collective work of this group produced a quality and relevant position statement on social media as well as providing valuable feedback on various topics as requested by the RNANT/NU Executive Director, Board, or other committees. Thank you all for your

hard work and dedication to improving the nursing profession in the Northwest Territories and Nunavut. It has been a pleasure working with you all.

Respectfully submitted,
Brianne Timpson, MN, RN (Chair)

## **NP Practice Committee**



Committee Members left to right: Elizabeth Cook, Pat Nymark, Kathleen Matthews, Candy Grimm and Colleen Wyatt.

#### **Committee Members**

Elizabeth Cook (Clinic NP; former NP educator; Chair; Yellowknife)

Jo-Anne Hubert (Clinic NP; Yellowknife)

Pat Nymark (NP Educator; Yellowknife)

Sheila Laity (Hospital NP [orthopedics]; Yellowknife)

Candy Grimm (Clinic NP; Yellowknife)

Danielle Simandl (Community HC NP; Fort Simpson)

Colleen Wyatt (Community HC NP; Nunavut)

Jacqueline Greene (Community HC NP; Nunavut)

Kathleen Matthews (Clinic NP; Yellowknife)

Donna Stanley-Young (Executive Director; RNANT/NU staff support)

### **Committee Purpose/Mandate**

The NP Practice Committee usually meets monthly (except July and August) to examine matters related to NP practice. Several issues continue to be discussed at the meetings. In addition, Donna (the Executive Director) brings updates from the Canadian Council of RN Regulators (CCRNR) pertaining to NP matters.

### Meetings

Members of the committee met seven times in 2015 – January, February, March, June, September, October and November. The committee meets on the first Wednesday of the month. One meeting was cancelled due to lack of quorum. This is a rare occurrence.

### **Activities/Projects**

A position statement was developed for RNs and NPs working with unregulated health care providers. A number of members also sit on other NP-related committees outside of the RNANTNU e.g. CNA CNPE committee, CASN (educational competencies related to controlled substances), and CAAPN. A jurisprudence learning module pertaining to NPs is being developed with input from committee members.

Other areas of concern include discussions related to an NP Refresher program, updating the NP Practice and Prescriptive Guidelines, and the role of the NP in methadone and marijuana prescribing and monitoring. Confirmation of the NP entry level competencies was begun in 2015 through the Canadian Council of RN

Regulators (CCRNR).

Of particular interest is the Medical Assistance in Dying (MAID) issue. MAID was first discussed at the September meeting using terminology such as euthanasia and assisted suicide. This topic continues to be discussed at each meeting. This particular issue is evolving quickly with the Federal government having a deadline for new Legislation by June of 2016. There are major implications for NPs.

## Challenges/Accomplishments

The recommendation that the committee members made re: formal controlled drugs and substances courses was accepted by Board of Directors and is set for implementation for 2016 registration year. Meetings are held via teleconference and it

would be nice to have at least one face-toface meeting with our committee members who do not live in YK.

The NP Practice and Prescriptive Guidelines were reviewed and updated, now waiting for Board approval and then sign off by the Ministers of Health and Social Services in both Territories.

#### Recommendations

I believe that the Medical Assistance in Dying issue will take up a great deal of the NP Practice Committee's time over the upcoming months. Methadone (more than marijuana) will also be ongoing in the upcoming year.

Respectfully submitted, Elizabeth Cook MN NP, Chair

## **National Committee Reports**

## **Canadian Nurses Protective Society**

My name is Brianne Timpson and I am a Registered Nurse living and working in Yellowknife, NT. In September 2014, I was nominated to the Canadian Nurses Protective Society (CNPS) Board of Directors as the Representative from the Northwest Territories and Nunavut. The CNPS Board of Directors is comprised of registered nurses appointed from each of the CNPS' member jurisdictions, the Chief Executive Officer of the Canadian Nurses Association (CNA) and the Chief Executive Officer of the CNPS. As a member of RNANT/NU you are automatically a beneficiary of CNPS and are entitled to a variety of services, including education sessions and liability protection. For more information about CNPS, please visit the website at <a href="https://www.cnps.ca">www.cnps.ca</a>.

## Treasurer's Report

A budget surplus of \$1,786 was estimated when the 2015 annual budget was built and approved by the Board of Directors. The audited financial statements for 2015 indicate a budget surplus of \$147,885.

#### Revenue

Revenues were \$22,726 greater than budgeted as a result of an increase in members with active practicing licences, a refund received from Assessment Strategies Inc. and an increase in fines paid by members as a result of registration violations.

#### **Expenses**

Expenses were \$123,376 less than expected in 2015. Reduced Board costs and no boards of inquiry for professional misconduct account for the majority of reduced expenses.

## **Unrestricted Surplus**

The unrestricted surplus is the funds accumulated over the life of the Association. The amount of the surplus is typically increased or reduced based on whether a deficit or surplus budget occurs. In 2015, the unrestricted surplus increased by \$165,071. This increase was the result of the budget surplus of \$147,885, a decrease in the Association's operating reserve per the auditor's recommendation and the amortization of tangible capital assets. The total unrestricted surplus is currently \$487,118.

Jennifer Pearce

Junifer Rearce

Treasurer

## **Auditor's Report**

# REGISTERED NURSES ASSOCIATION OF NORTHWEST TERRITORIES AND NUNAVUT

Yellowknife, NT

FINANCIAL STATEMENTS For the year ended December 31, 2015

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## Registered Nurses Association of the Northwest Territories and Nunavut

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#### MANAGEMENT'S RESPONSIBILITY FOR REPORTING

The accompanying financial statements have been prepared by management, which is responsible for the reliability, integrity and objectivity of the information provided. They have been prepared in accordance with Canadian accounting standards for not-for-profit organizations. Where necessary the statements include amounts that are based on informed judgements and estimates by management, giving appropriate consideration to reasonable limits of materiality.

In discharging its responsibility for the integrity and fairness of the financial statements and for the accounting systems from which they are derived, management maintains the necessary system of internal controls designed to provide assurance that transactions are authorized, assets are safeguarded and proper records are maintained. These controls include quality standards in hiring and training employees, written policies and procedures manuals, and accountability for performance within appropriate and well-defined areas of responsibility. The Board's management recognizes its responsibility for conducting the Board's affairs in accordance with the requirements of applicable laws and sound business principles, and for maintaining standards of conduct that are appropriate.

Avery Cooper & Co. Ltd. Certified General Accountants provided an independent, objective audit for the purpose of expressing an opinion on the financial statements in accordance with Canadian generally accepted auditing standards.

John Stanley-Young, RN, BSCN, MN

**Executive Director** 

February 8, 2016

## STATEMENT OF FINANCIAL POSITION

December 31, 2015

## ASSETS

	2015	2014
CURRENT Cash Short term investment (note 3) Prepaid expenses	\$ 1,134,579 300,000 3,869	\$ 1,101,309 525,000 13,644
	1,438,448	1,639,953
INVESTMENTS (note 4)	583,200	250,598
TANGIBLE CAPITAL ASSETS (note 5)	12,768	18,955
	\$2,034,416	\$1,909,506
LIABILITIES		
CURRENT Trade payables and accruals (note 6) Wages and benefits payable Government remittances payable (note 7) Deferred revenue (note 8)  CONTINGENT LIABILITY (note 12)	\$ 46,688 11,550 55,876 945,415 1,059,529	\$ 50,621 30,044 55,121 946,718 1,082,504
NET ASSETS		
RESERVES (note 9) per page 2	475,000	486,000
UNRESTRICTED ACCUMULATED SURPLUS per page 2	487,118	322,047
INVESTED IN TANGIBLE CAPITAL ASSETS per page 2	12,769	18,955
	974,887	827,002
	\$2,034,416	\$1,909,506
Approved:  President  President	narce	Treasurer

See accompanying notes

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## STATEMENT OF CHANGES IN NET ASSETS

For the year ended December 31, 2015

				2015
	Reserves	Unrestricted accumulated t surplus	Invested in tangible capital assets	Total
BALANCE, opening	\$ 486,000	\$ 322,047	\$ 18,955	\$ 827,002
Excess of revenues over expenses	-	147,885	-	147,885
Transfer from operating reserve	(11,000)	11,000	-	-
Acquisition of tangible capital assets	-	(9,632)	9,632	-
Amortization of tangible capital assets		15,818	(15,818)	
BALANCE, closing	\$ 475,000	\$ 487,118	\$ 12,769	\$ 974,887
				2014
	Reserves	Unrestricted accumulated t surplus	Invested in tangible capital assets	Total
BALANCE, opening As previously reported Prior period adjustment As restated	\$ 100,000 - 100,000	\$ 573,182 22,704 595,886	\$ - 36,435 36,435	\$ 673,182 59,139 732,321
Excess of revenues over expenses	-	94,681	-	94,681
Transfers (note 9)	386,000	(386,000)	-	-
Acquisition of tangible capital assets	-	(7,080)	7,080	-
Amortization of tangible capital assets		24,560	(24,560)	
BALANCE, closing	\$ 486,000	\$ 322,047	\$ 18,955	\$ 827,002

See accompanying notes

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STATEMENT OF OPERATIONS For the year ended December 31, 2015

	2015	2015	2014
	Budget	Actual	Actual
REVENUES			
Active/Temporary membership fees	\$1,022,144	\$1,037,283	\$ 970,678
Associate membership fees	3,500	1,938	2,563
CNA fees	-	-	69,238
CNPE administration fees	806	450	269
CNPE revenue	3,631	2,250	1,210
CNPS membership fees	41,657	40,787	40,647
CRNE administration fees	1,000	5,617	1,700
CRNE exam fees	-	-	6,379
Investment income	12,900	13,955	24,557
Miscellaneous	-	787	1,137
Nurse practitioner fees	3,465	2,805	2,860
Other fees	9,345	12,887	6,869
Processing fees	18,063	19,500	24,501
Verification fees	8,338	9,313	9,674
	1,124,849	1,147,572	1,162,282
EXPENSES			
Advertising and promotion	5,000	1,987	3,755
Amortization	_	15,818	24,560
Board Expenses	62,340	29,866	45,468
Communications	6,825	7,038	7,077
Computer	26,100	21,751	8,564
Consulting fees	196,600	143,300	177,462
Insurance	6,020	5,789	5,527
Interest and bank charges	25,000	29,392	25,405
Memberships	47,815	48,053	111,468
Office and administration	118,010	80,756	98,028
Professional fees	28,000	33,003	28,301
Rent	29,870	28,689	25,502
Salaries and related benefits	557,205	542,638	497,618
Travel	14,278	11,607	8,866
	1,123,063	999,687	1,067,601
EXCESS OF REVENUES OVER EXPENSES	\$ 1,786	\$ 147,885	\$ 94,681

See accompanying notes

STATEMENT OF CASH FLOWS For the year ended December 31, 2015

	2015	2014
CASH FLOWS FROM OPERATING ACTIVITIES		
Cash receipts from members and students	\$1,089,536	\$1,213,230
Cash paid for materials and services	(444,195)	(554,461)
Cash paid for salaries and related benefits	(460,277)	(489,304)
	185,064	169,465
CASH FLOWS FROM INVESTING ACTIVITIES		
Increase in short-term investments	-	(100,000)
Decrease in short-term investments	225,000	-
Increase in long term investments	(367,162)	(5,498)
Purchase of tangible capital assets	(9,632)	_
	(151,794)	(105,498)
INCREASE IN CASH	33,270	63,967
CASH, opening	1,101,309	1,037,342
CASH, closing	\$1,134,579	\$1,101,309

#### NOTES TO THE FINANCIAL STATEMENTS

December 31, 2015

#### 1. NATURE OF OPERATIONS

Registered Nurses Association of NWT and Nunavut (the "Association") is incorporated under the Nursing Profession Act (NWT).

The Association is a not-for-profit organization to regulate the profession of nursing by setting its own standards of practice, education, investigating and disciplining its members. Its purpose is to promote and ensure competent nursing practice for the people of the Northwest Territories and Nunavut.

The Association is exempt from income tax under paragraph 149(1)(1) of the Income Tax Act.

#### 2. SIGNIFICANT ACCOUNTING POLICIES

These financial statements are prepared in accordance with Canadian accounting standards for notfor-profit organizations. The significant policies are detailed as follows:

#### (a) Cash equivalents

The Association considers all investments with maturities of three months or less and demand bank loans that are utilized periodically for day to day operations to be cash equivalents.

#### (b) Foreign exchange

The monetary assets and liabilities of the Association denominated in foreign currencies are translated at the rate of exchange at the balance sheet date. Revenues and expenses are translated at the average exchange rate prevailing during the year. Exchange gains or losses are included in operations.

#### (c) Financial instruments

The Association initially measures its financial assets and liabilities at fair value.

The Association subsequently measures all its financial assets and financial liabilities at amortized cost, except for investments in equity instruments that are quoted in an active market, which are measured at fair value. Changes in fair value are recognized in surplus.

#### NOTES TO THE FINANCIAL STATEMENTS

December 31, 2015

#### 2. SIGNIFICANT ACCOUNTING POLICIES, continued

#### (d) Tangible capital assets

Tangible capital assets are recorded at cost. The Association provides for amortization using the straight-line method at rates designed to amortize the cost of the tangible capital assets over their estimated useful lives. One half of the year's amortization is recorded in the year of acquisition. No amortization is recorded in the year of disposal. The annual amortization rates are as follows:

Computer equipment 3 years Office equipment 5 years

Amortization of leasehold improvements is recorded over the remaining term of the lease.

## (e) Revenue recognition

The Association follows the deferral method of accounting for contributions. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when received or receivable if the amount to be received can be reasonably estimated and collection is reasonably assured. Endowment contributions are recognized as direct increases in net assets.

Restricted investment income is recognized as revenue in the year in which the related expenses are incurred. Unrestricted investment income is recognized as revenue when earned.

Externally restricted contributions for the purchase of capital assets that will be amortized are recorded as deferred capital contributions and recognized as revenue on the same basis as the amortization expense related to the acquired capital assets. Externally restricted contributions for the purchase of capital assets that will not be amortized are recognized as direct increases in net assets to the Investment in Capital Assets balance.

Revenue from fees are recognized when earned.

#### (f) Contributed materials and services

Contributions of materials and services are recognized in the financial statements at fair value at the date of contribution, but only when a fair value can be reasonably estimated and when the materials and services are used in the normal course of operations, and would otherwise have been purchased.

#### NOTES TO THE FINANCIAL STATEMENTS

December 31, 2015

#### 2. SIGNIFICANT ACCOUNTING POLICIES, continued

#### (g) Measurement uncertainty

The preparation of financial statements in accordance with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the period. Significant areas requiring the use of estimates include: estimated useful lives of tangible capital assets. Actual results may differ from management's best estimates as additional information becomes available in the future.

#### 3. SHORT TERM INVESTMENT

Short-term investments consist of guaranteed investment certificates held with the Royal Bank of Canada and are as follows:

	_	2015	_	2014
Non-redeemable GIC, annual interest at 1.30%, matures May				
14, 2015	\$	-	\$	375,000
One Year Cashable, Redeemable GIC, annual interest at				
1.00%, matures May 14, 2015		-		50,000
One Year Cashable, Redeemable GIC, annual interest at				
1.00%, matures February 24, 2015		-		100,000
One Year Cashable, Redeemable GIC, annual interest at				
1.00%, matures January 19, 2016	_	300,000	_	-
	\$	300,000	\$	525,000

#### 4. INVESTMENTS

Investments consist of the following:

Guaranteed investment certificates held with the Royal Bank of Canada:

	_	2015	_	2014
Five Year Cashable, Redeemable GIC, annual interest at				
1.40%, matures May 19, 2020	\$	330,375	\$	-
Other Investment - see below	_	252,825	_	250,598
	\$	583,200	\$	250,598

The other following investments consist of marketable securities held with National Bank Investments Inc. and are as follows:

## NOTES TO THE FINANCIAL STATEMENTS

December 31, 2015

### 4. INVESTMENTS, continued

			2015	2014
Investments - Nationa Unrealized gain on in			\$ 220,340 32,485	\$ 216,038 34,560
			\$ 252,825	\$ 250,598
Investment mix:				
			2015	2014
Cash and short-term Fixed income Canadian equities Global equities			\$ 2 204,925 26,716 21,182	\$ 2 201,725 29,015 19,856
			\$ 252,825	\$ 250,598
5. TANGIBLE CAPITA	L ASSETS			
			2015	2014
	Cost	Accumulated amortization	Net	Net
Computer equipment Leasehold improvement Office equipment	\$ 27,253 \$ 59,520 45,866	\$ 24,789 55,980 39,102	\$ 2,464 3,540 6,764	\$ 2,280 12,455 4,220
	\$ 132,639	\$ 119,871	\$ 12,768	\$ 18,955
6. TRADE PAYABLES	AND ACCRUALS			
			2015	2014
Trade payables Visa payable Accrued liabilities Fees payable			\$ 21,595 4,315 19,623 1,155	\$ 27,485 7,376 15,760
			\$ 46,688	\$ 50,621

## NOTES TO THE FINANCIAL STATEMENTS

December 31, 2015

#### 7. GOVERNMENT REMITTANCES PAYABLE

	 2015	_	2014
GST payable Payroll remittances payable	\$ 35,842 20,034	\$	44,647 10,474
	\$ 55,876	\$	55,121

#### 8. DEFERRED REVENUE

Deferred revenue represents non-refundable deposits made which will be used up by the following year end. Changes in deferred revenue during the year are as follows:

	_	Opening balance	_	Deposits	16	Revenue cognized	_	Closing balance
Practitioner fees	\$	2,365	\$	2,255	\$	2,365	\$	2,255
Active membership fees		845,180		841,927		847,551		839,556
Associate membership fees		1,938		2,438		1,938		2,438
Renewal late fees		4,500		4,500		4,500		4,500
Processing fees		438		_		438		_
CNPS fees		33,500		38,356		33,602		38,254
CNA fees		58,797		58,577		58,961		58,412
	\$	946,718	\$	948,053	\$	949,355	\$	945,415

#### NOTES TO THE FINANCIAL STATEMENTS

December 31, 2015

#### 9. RESERVES

The Association maintains the following internally restricted reserves:

	Opening balance	Transfers	Closing balance
Operating Surplus Reserve	\$ 286,000	\$ (11,000)	\$ 275,000
Professional Conduct Reserve	200,000		200,000
	\$ 486,000	\$ (11,000)	\$ 475,000

The Association may not use any internally restricted amounts for any other purpose without the approval of the Board of Directors.

#### Operating Surplus Reserve

Under the Administration Finance Policy AF4, the Association is required to maintain the operating reserve at three months of budgeted operating expenses.

#### Professional Conduct Reserve

Under the Professional Conduct Policy PC3, the Association is required to maintain a minimum of \$200,000 for future costs relating to professional misconduct.

#### 10. COMMITMENTS

As at December 31, 2015, the Association is committed to a lease for premises expiring on March 31, 2018, and a lease for copier/fax machine expiring on September 16, 2016. Future minimum lease payments required under these operating leases for premises and copier/fax machine are as follows:

2016	\$	34,634
2017		29,250
2018		7,313
	<u>\$</u>	71,197

#### 11. BUDGET AMOUNTS

The 2015 budget amounts on the Statement of Operations are presented for information purposes only and are unaudited.

#### NOTES TO THE FINANCIAL STATEMENTS

December 31, 2015

#### 12. CONTINGENT LIABILITY

There is one appeal pending against the Association in the Supreme Court of Canada and the Supreme Court of Nunavut involving a former member. It is the opinion of management that final determination of this proceeding will not materially affect the financial position or results of operations of the Association.

#### 13. FINANCIAL INSTRUMENTS

The Association is exposed to various financial risks through transactions in financial instruments. The following provides helpful information in assessing the extent of the Association's exposure to these risks.

#### (a) Fair value

The fair value of current financial assets and current financial liabilities approximates their carrying value due to their short-term maturity dates. The fair value of long-term financial liabilities approximates their carrying value based on the presumption that the Association is a going concern and thus expects to fully repay the outstanding amounts.

#### (b) Currency risk

Currency risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rates. As at December 31, 2015, National Bank investments of \$21,182 (2014 - \$19,856) are shown in US dollars and converted into Canadian dollars.

#### (c) Market risk

Market risk is the risk that the value of a financial instrument will fluctuate as a result of changes in market prices, whether the factors are specific to the instrument or all instruments traded in the market. The Association does have a market risk in the investments with National Bank Investments of \$252,825 (2014 - \$250,598).

## Meet the 2015 RNANT/NU Board of Directors



Board Members front row left to right: Jo-Anne Hubert, Linda Simpson, Shawna Tohm, Jeanette Hall and Jennifer Pearce. Back row left to right: Robert Nevin, Joanne Dignard, Michael Blake, and Kerry Lynn Durnford. Missing: Deborah Colquhoun and John Hussey.

### **Position**

President
President Elect
NT Vice President
NT Public Representative
NT North Representative
NT South Representative
NU Vice President
NU Public Representative
NU East Representative
NU West Representative
Secretary
Treasurer

## Representative

Robert Nevin
Shawna Tohm
Jo-Anne Hubert
Jeanette Hall
Deborah Colquhoun
Linda Simpson
Jennifer Pearce
John Maurice/John Hussey\*
Cathy Rose/Joanne Dignard\*
Michael Blake
Kerry Lynn Durnford
Jennifer Pearce

\*John Maurice completed his term as NU Public Representative on April 25, 2015. John Hussey was appointed as the NU Public Representative on November 9, 2015. Cathy Rose resigned as the NU East Representative effective April 25, 2015. Joanne Dignard was appointed to the NU East Representative position by the Board of Directors on November 9, 2015.

RNANT/NU Box 2757 Yellowknife, NT X1A 3R9