PRESIDENT’S MESSAGE
The importance of integrity through trust, ethics, and authenticity in the nursing profession.

CELEBRATING 100 YEARS
This year, the SRNA celebrates 100 years of profession-led regulation for Registered Nurses in Saskatchewan.

ETHICAL CONSIDERATIONS
As a Registered Nurse do I chaperone my teen’s graduation party where underage drinking will occur?
The Saskatchewan Registered Nurses’ Association (SRNA) is a profession-led regulatory body and association established in 1917 by the provincial legislature. The SRNA is accountable for public protection by ensuring members are competent and promotes the professional interest of its members in the public interest. Individual members are personally accountable for their professional nursing practice through adherence to the code of ethics, practice standards and ongoing continuing competence requirements.

The SRNA News Bulletin is distributed six times per year by the SRNA. Its' purpose is to inform members, health system partners and the public about the Association's activities and provide a forum for sharing information on nursing topics of interest. Inclusion of items in the SRNA News Bulletin does not imply endorsement or approval by the SRNA. A subscription is $21.40 per year, outside Canada, $30.00 per year. ISSN 1494-7668
President's Message
Joanne Petersen, RN, SRNA President

Integrity. Leadership. Innovation


For the past 100 years, SRNA has been entrusted with a mandate to protect the public by ensuring our members are accountable, professional and adhere to a Code of Ethics. By delivering on this mandate, the association and our profession have played a pivotal role in advancing healthcare for the people of Saskatchewan.

We have done this through nursing integrity, leadership and innovation.

Throughout the year, SRNA will aim to define and demonstrate these values. In this issue, we share stories of how upholding integrity as individuals, professionals and team members has enabled incredible strides in the nursing profession.

I embrace the value of integrity through trust, ethics and authenticity, and I strive to uphold this value every day in my practice. For me, integrity with my team is equally important to the care I deliver to patients and their families. I understand that if I interact with respect and acknowledge the valuable contribution each member of the healthcare team provides, we will together deliver the best care for our patients, their families and the people of Saskatchewan.

The value of integrity is the power of empathy and always being mindful of the way you treat people. By nature and in training, RNs are team leaders. We set a tone and we are accountable for our actions. Each and every one of us plays an integral role in upholding the value of integrity.

As you read through this magazine, I ask that you reflect on what integrity means to you, then work together to make this — our centennial year — a special one.

Through integrity, we will advance our practice and we will continue to have the trust of the people we care so deeply about — each other and the people of Saskatchewan.

To act with integrity, you must first know who you are.

Joanne Petersen, RN, SRNA President
Marking 100 Years of Integrity, Innovation and Leadership

This year, the SRNA celebrates 100 years of profession-led regulation for Registered Nurses in Saskatchewan. The need to ensure RNs were well prepared through theory and clinical education to deliver safe patient care was an important call to action for establishing the Association in 1917.

Jean E. Browne – A Visionary Leader

Jean E. Browne was the chair of the committee that drafted the Registered Nurses Act (1917) and she went on to become the first president of the SRNA the same year. She was the first school nurse in Saskatchewan and the first representative of the SRNA to become president of the Canadian Nurses Association. Jean received the Florence Nightingale medal in 1939 from the International Committee of the Red Cross for outstanding nursing service.*

Jean E. Browne launched the SRNA with integrity and a compelling vision for the future. Her contributions were instrumental in establishing the initial legislation and bylaws for RN regulation in the province.

*Traditions & Transitions - A Photographic History of Nursing in Saskatchewan (Bassendowski, 2006)
Your Input Matters on May 4, 2017

As a profession-led association, your input on SRNA’s initiatives and your perspectives on issues are essential to helping advance, innovate and optimize our profession. One important aspect of the Annual Meeting proceedings is the discussion and voting on resolutions, which are an important tool that help shape our focus. Understanding the process and timelines for developing and submitting resolutions is critical to ensuring your input is presented at the upcoming Annual Meeting on May 4, 2017.

What is a resolution?

A resolution is the process for SRNA members to provide input on issues facing the profession or on initiatives you think SRNA could be involved.

How and when can a resolution be provided?

Resolutions can be presented to the SRNA Council, by person, group, annual or special meeting assembly. Resolutions can be presented to Council at any time or brought forward at the Annual Meeting as a motion from the floor.

What should resolutions include?

Resolutions must include:

- Title: subject of the resolution
- Resolution statement: an expression of intent or what action you are proposing the Association take in relation to the subject of the resolution. This statement begins with: “Be it resolved ...”, and should be written in a clear and concise manner.
- Explanatory notes: identify why you believe the issue should be addressed. If you are making a number of points, order them numerically. Remember that resolutions must have a provincial focus and relate to the mandate of the Association.
- Identification: names of “mover” and “seconder” of resolution. Both must hold active-practising status with the Association. Either the “mover” or “seconder” should be available to speak to the resolution at the Annual Meeting.

What happens to resolutions/motions that are approved by membership at the Annual Meeting?

These resolutions are reviewed by Council to make reasoned decisions regarding any actions to be taken.

Where should resolutions be submitted?

Resolutions and questions should be sent to SRNA President Joanne Petersen at president@srna.org.

The deadline for resolutions from the floor at the Annual Meeting is 10 a.m. on May 4, 2017.
SRNA 2017 Elections

Cast Your Vote to Shape the Future of the SRNA

Each spring, the annual SRNA election provides members an opportunity to vote for incoming members of the SRNA Council and the Nominations Committee. In addition to being a professional responsibility, voting enables SRNA members to select the candidates they feel will best govern our association.

When and how to vote

Electronic voting opens March 28, 2017 and closes at noon on May 4, 2017. Computers will be available at the Annual Meeting in Saskatoon. You can only vote once, so you will need to know the candidate you wish to vote for in each position at the time of voting.

What you need to vote

All eligible voters were sent an email which provided your unique username and password, announcing the voting period opening and providing a link to the voting page. If you did not receive an email, please contact the SRNA office by phone at 1-800-667-9945 or in Regina at 306-359-4200.

Learn more about the candidates

Several candidates have chosen to let their name stand for more than one position in the 2017 election. Each candidate has declared, at the time of nomination, which position they would prefer to assume if they receive the most votes for both positions.

The SRNA provided candidates a platform to share their vision for the future of registered nursing. Be sure to check out the recorded candidate forums, videos and position statements online at http://www.srna.org/about-us/337-srna-council-nominations-and-nominations-committee-nominees

Questions about the voting process can be directed to Anita Nivala at anivala@srna.org or by calling the office at 1-800-667-9945. Tony Giruzzi can be contacted for technical support by calling the same number or by email tgitruzzi@srna.org
SRNA 2017 Elections continued

2017 SRNA Council & Nominations Committee Candidates

President-Elect:

- Marilyn Barlow, RN, General duty RN – Saskatoon
- Warren Koch, RN, General duty RN – LaRonge

Saskatoon Health Region (1-year term) – Region VI:

- Marilyn Barlow, RN, General duty RN – Saskatoon
- Sarabjeet Singh, RN, General duty RN – Saskatoon

Cypress & Heartland Health Regions – Region I:

- Melissa Carignan, RN(NP), Primary Care – Ponteix
- Ashley Schwartz, RN, Women’s and Children’s RN – Swift Current

Five Hills & Sun Country Health Regions – Region II:

- Justine Protz, RN, Interim Manager – Home Care South – Weyburn – Elected by Acclamation

Mamawetan Churchill River, Athabasca and Keewatin Yatthe Health Regions – Region V:

- Warren Koch, RN, General duty RN – LaRonge
- Rena Sutherland, RN(NP), Primary Care – Buffalo Narrows

Candidates for the Nominations Committee:

- Sarabjeet Singh, RN, General duty RN – Saskatoon
- Lorrie Harrison, RN, Retired – Regina

Integrity in the Voting System

An independent third-party audit technology, “Balloteer” maintains a robust, secure, and reliable network infrastructure and ensures compliance with best practices for the security of network assets. Their multilayer network perimeter protects the voting application, data and results.
Safe Teaching. Safe Patient Care.

The expectation of safe teaching and learning practices exists to support safe patient care at the bedside. It also supports the integrity of the profession to ensure an RN or RN(NP) has the knowledge, skills and abilities to deliver patient and family-centred care across the care continuum and in any health care setting.

RN Clinical Educators are responsible for assessing the beginning level of knowledge of participants in an education session. This can be obtained through a conversation with participants to clearly understand the foundational knowledge they bring to the educational opportunity. They may also inform their understanding of foundational knowledge of applicable care providers through available resources.

“Understanding the foundation of knowledge for each participant assists the RN Clinical Educator in safely providing targeted learning to participants. This is vital to ensure understanding and application at the bedside and ultimately provide the safest care possible,” explains Terri Belcourt, RN Nursing Advisor, Learning & Engagement.
As RNs are often leaders of nursing teams, all RNs are expected to know the scope of practice of team members, as per the Standards and Foundation Competencies for the Practice of RNs (page 16, Competency 76.e.). For the RN Clinical Educator, this means they are confident the skill being taught to the care provider is within the broad boundaries of the legislated scope of practice of that provider, and there is organizational policy to support the provision of the specific skill by the specific care provider.

“RN Clinical Educators are the conduit between a nurse learning a new skill and the patient. Consequently, the RN Clinical Educator must know and understand the role of the specific care providers in delivering the targeted nursing skill, the learning objectives, the types of patients/clients who will be receiving the nursing skill being taught, and the competencies required,” Terri emphasizes.

Within the Standards and Foundation Competencies for the Practice of Registered Nurses, there is a reference to the Registered Nurse in Education: “… focuses on students... plans, implements and evaluates education to address learning needs... creates a professional learning environment” (pg. 8). Within this context, competencies such as 33, 41, 55 and 76 a, b and e apply to RN Clinical Educators as they assess, plan, implement and evaluate learning plans. These competencies also apply to promoting inter-professional collaboration and building teams based on respect for the unique and shared competencies of each team member.

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**Building Foundational Client Care Knowledge**

**Programs and courses to support RN Clinical Advisors in teaching:**

**Primary Care Paramedic – certificate:**
http://saskpolytech.ca/programs-and-courses/programs/Primary-Care-Paramedic.aspx

**Advanced Care Paramedic – Diploma:**
http://saskpolytech.ca/programs-and-courses/programs/Advanced-Care-Paramedic.aspx

**Foundations and scope of LPN practice can be found in Practice Guidelines located on the SALPN website:**

**Practical Nursing program information available from Saskatchewan Polytechnic:**
http://saskpolytech.ca/programs-and-courses/programs/Practical-Nursing.aspx

**Psychiatric Nursing program information available from Saskatchewan Polytechnic:**
http://saskpolytech.ca/programs-and-courses/programs/Psychiatric-Nursing.aspx

**Bachelor of Psychiatric Nursing program information available from Saskatchewan Polytechnic:**

**Saskatchewan Collaborative Bachelor of Science in Nursing (University of Regina and SaskPolytech collaborative program):**
https://www.uregina.ca/nursing/programs/index.html

**College of Nursing (University of Saskatchewan):**
https://www.usask.ca/nursing/
Annual Program Audits Measure Continuing Competence and Professional Compliance and Promotes Integrity of Practice

The Continuing Competence Program (CCP) strives to improve the quality of nursing care provided by practicing members to the public. Annual audits are a bylaw requirement to determine compliance with the four required CCP components: personal assessment, feedback, learning plan, and evaluation, as well as to monitor practice hours to ensure members meet bylaw requirements. The annual audits also help maintain the integrity of our profession.

The 2015 Licensure Year audit took place June 8 and 9, 2016 by an SRNA volunteer audit committee. Auditors included two RN(NP)s and four RNs with practice experience in administration, education and clinical practice.

CCP Audit Overview

106 RNs and 13 NPs were randomly selected from the membership database to participate. Participants submitted a survey and a learning plan that was developed for the 2015 licensure year.

Recommendation to members

• Review how to develop learning plans that will increase the quality of practice.
• Although verbal feedback is essential to everyday practice, written feedback is required for the program.
• Review tips on completing the CCP in the five-minute video, A Member’s Perspective: vimeo.com/album/3559473
• The CCP must be completed before completing licensure renewal.

CCP Audit Results

- 72% Members that met the hourly audit requirements
- 23% Members that received a letter suggesting ways to improve their program or were required to work with the Registrar or Regulatory Advisor and complete specific activities.
Annual Hourly Audit Overview

RNs must meet 1,125 practice hours in the five-year period preceding the registration year.
RN(NP)s must meet the 900 hours in the three-year period preceding the registration year.
In September 2016, 50 RNs and 9 NPs were randomly selected from the membership database to participate:

**Annual Hourly Audit Results**

- **92%** Documentation returned by the employer and met the requirements.
- **8%** Members waiting for employers to return documentation or did not participate, citing they no longer resided in the province or have retired from the profession. Non-compliant members must meet the requirements before renewing licensure.

Continuing Competence Program Accessors Wanted

**Contribute Your Expertise to SRNA’s Continuing Competence Program**

SRNA needs your nursing expertise as an Assessor for the annual Continuing Competence Program (CCP) Audit taking place June 20 and 21 at the SRNA office in Regina. Assessors will conduct a confidential focused review of member CCP documents. Travel, accommodation, meals and honoraria are covered as per SRNA policy.

Continuing competence is the ongoing ability of a RN, RN(AAP), GN, RN(NP), and RN(GNP) to integrate and apply the knowledge, skills, judgment and personal attributes required to practice safely and ethically in a designated role and setting. Maintaining continuing competence involves an ongoing process of linking the code of ethics, standards of practice and lifelong learning with reflective practice activities.

**Ensuring Competency and Integrity**

The SRNA CCP is integral to professional nursing practice and is supported by The Registered Nurses Act, 1988 and the current SRNA Bylaws, Bylaw V.1 Continuing Competence. Ensuring the continued competence of SRNA members and underscores the integrity of the RN profession.

**Assessor Qualities**

- Currently registered in good standing with the SRNA
- Knowledgeable about the CCP
- Can commit to two days for the review

**Selection process**

The SRNA Registration and Membership Committee will review the applications and select the auditors. SRNA will notify applicants by April 30, 2017.

**How to Apply & More Information**

Send a brief letter outlining your interest, and attach a short biography that includes the areas of nursing you have practiced by April 14, 2017 to dmainland@srna.org. Additional information contact dmainland@srna.org
Vulnerable Sector Check Report

New Reporting Will Help Ensure Safety of Patient Care and Integrity of the RN Profession

With a mandate to ensure safe nursing care for the people of Saskatchewan and continuous quality improvement in regulation, the SRNA is introducing Vulnerable Sector Check (VSC) reporting beginning June 1, 2017.

What is a VSC report?

A VSC report is a best practice for confirming whether an individual has a criminal record, and any record of suspensions (formerly pardons) for sexual offences. It includes a search in a national database maintained by enforcement authorities including the Royal Canadian Mounted Police (RCMP), city police or a police service from the country where an applicant currently resides or has formerly resided.

Who must submit a VSC report for licensure?

A VSC will only be required by those who are seeking:
• A Graduate Nurse licence
• Initial registration as a RN or RN(NP)
• A practicing licence after a two-year time lapse
Vulnerable Sector Check Report continued

Will a currently-licenced RN or RN(NP) need to provide a VSC report?

No, currently licenced RNs or RN(NP)s are not required to submit a VSC report.

What is the purpose of a VSC report?

It provides the SRNA with essential information to assess the professional suitability of an applicant to work or interact with vulnerable members of society, such as children, the elderly and persons with disabilities.

Why does the SRNA require a VSC report?

The absence of a criminal conviction is one component for determining an applicant's good character or professional suitability to practice registered nursing. The public must have confidence in the nursing profession, and trust they will receive safe, competent care from RNs who practice according to standards and the Code of Ethics.

Where can I get a VSC report?

Canada: contact your RCMP detachment or City Police.
USA: contact the Federal Bureau of Investigation
Other countries: contact the SRNA at international@srna.org for assistance.

Is there a cost for a VSC report?

There may be a fee for this service. The enforcement agency will provide you with direction for obtaining a VSC report and the fee, if it is applicable. Any costs associated with a VSC are the responsibility of the applicant.

Does the SRNA have a time limit for issuing a VSC report?

Yes, the SRNA must receive a VSC report that has been issued within the previous six (6) months of the application date for licensure.

Who will have access to my application information including my VSC report?

The SRNA has a privacy policy that adheres to the Health Information Privacy Act (HIPA) and the Personal Information Protection and Electronic Documents Act (PIPEDA). Your application for licensure is reviewed by only those who are required to do so. A copy of your document is maintained in your electronic file with restricted access.

Could I be denied registration if I have been convicted of a criminal offence?

The SRNA follows an administrative policy for reporting a criminal offence. Each application is considered on a case-by-case basis. If your VSC report requires a review, you will be informed of the process. Information can be found at www.srna.org under Registration/Licensure, Immediate Reporting of a Criminal Offence.

If you have any questions about this new requirement, contact us at renew@srna.org.

Understanding the VSC Report

The bylaws supporting the VSC report were approved by the SRNA membership at the May 2016 Annual Meeting, and by the Minister of Health in December 2016. The following are questions and answers to help SRNA members learn more about this new requirement.
Ethical Considerations as an RN Mom

Jennifer Jacobs, RN, Staff Nurse, Rural Hospital, Terri Belcourt, RN, SRNA Nursing Advisor, Learning & Engagement

My ethical dilemma: Do I choose to participate in the event and promote underage drinking by our youth?

Do I chaperone my teen’s graduation party where underage drinking will occur?

My teen is graduating from our small town high school. As a parent, I’m expected to be one of the chaperones for the class graduation party, which will involve unrestricted underage drinking. I’m concerned about my responsibilities and professional ethics as an RN, especially if something were to go wrong, for which I believe there is potential. Many people there know I’m an RN and the expectation I would help address any medical situation at the party is frightening. RNs are held to our standards of practice regardless of the location of an incident, so I want to ensure I’m looking out for my teen’s safety while ensuring the integrity of my professional practice. I contacted the SRNA, looking for insight into the best choice to make as an RN in this situation.

Understanding Professional Responsibility

The SRNA advisor suggested I refer to our Canadian Nursing Association (CNA) Code of Ethics, reminding me nurses are ethically bound to promote health and well-being and held to our standards, not only in our workplaces, but also when in a RN volunteer role.

I also contacted the Canadian Nurses Protective Society (CNPS) for advice. CNPS was quite blunt with their reply: “Legally the situation involves illegal underage drinking.” ‘Planned’, ‘illegal’ and ‘negligence’ I wrote, listening to their advisor.

I understand the intention of the event is well meaning; parents are trying to provide a safe atmosphere for a graduation party, where no drinking and driving will occur. CNPS advised this could be considered a type of ‘harm reduction strategy.’ However, as graduates are not given any reasonable limits on consumption, it cannot be truthfully considered harm reduction.
Challenging Social Norms

Everyone wants the outcome of a safe and happy grad. Perhaps this situation is an opportunity for RN leadership by challenging the social norm through education. Teenage drinking is dangerous. Teens are at higher risk of developing alcohol poisoning due to their age. These are facts based on statistics. RNs can provide the evidence so the public can make informed decisions. With concrete facts in front of them, parents and teens may make different choices. Do parents and teens really understand how quickly a “fun” evening can change to being life altering or deadly? Has the idea of a dry or minimal alcohol grad ever really been considered?

As RNs, whether we work as an educator, in hospitals, public health, home care, or other areas, much of our daily work is based on health promotion and safety of the public. Supporting underage drinking runs contrary to those concepts, a social norm we may not want to endorse in youth. How can we promote lifestyle choices and habits best for a healthy life?

SRNA Perspective

RNs are held to professional standards based on our knowledge, skills and education. We have to reflect on the risks associated with activities we are invited or choose to be involved with. As a recognized professional volunteering for an event, the RN could be reported by a parent or other community member for incompetence or misconduct to the SRNA.

Ensuring Integrity

SRNA, together with members and the public, describe a standard of professionalism for RNs. In this situation RNs might undertake a number of activities, including:

• Promoting health in youth by providing education on the dangers of underage drinking.
• Making the decision not to be involved with the event if alcohol is involved.

The Facts of Underage Drinking

There are several resources to foster discussion:

• Alcohol Poisoning Pamphlet www.dontbesorry.org
• Canadian Centre on Substance Abuse – Youth and Alcohol Fact Sheet
• http://www.illinois.gov/ilcc/All%20documents%20site%20wide/Education/Under%2021/Materials/BestFriendWeb.PDF
• Prom Night and Alcohol: How to Protect Your Teen

Draft Code of Ethics Now Available for Your Feedback

The SRNA is one of many organizations undertaking a jurisdictional feedback process for the Canadian Nurses Association (CNA) refresh of the Code of Ethics. As part of the ongoing evolution of the Code, this draft version is more responsive to the full nursing family in Canada.

The Draft CNA Code of Ethics will be posted on our website with a survey link to gather your feedback from April 1, 2017 to May 4, 2017. You will also be able to join an in person discussion at our Annual Meeting and Education Conference as well as webinar on the topic. Your feedback is important so please take the time to share your perspective.

For more information, please contact Carole Reece at creece@srna.org
RNAs Leading Change: Update

Enhancing Care for Residents in Northern Communities

The newly licensed RN(AAP)s are up and running in the northern primary care sites using SRNA Clinical Decision Tools (CDT) to manage the primary care needs of the residents of their communities. As of mid-February there are 78 RN(AAP)s practising in 16 sites, using not only the CDTs to direct their practice, but also RN Specialty Practices-Procedures and Clinical Protocols specific to their practice settings and population. Simple suturing of wounds and removal of fish hooks are some of the RN Specialty Practices RN(AAP)s perform.

“Implementation under an Advisory Committee is progressing well, education and assessment is continuing, and the program is ensuring accountability and integrity in patient care,” says Linda Muzio, RN, RNs Leading Change Project Manager. The committee includes employers and RN(AAP)s in northern primary care sites, regional, provincial and federal health bodies, educators, aboriginal organizations and the public.”

Education, Assessments & Engagement

• Prior Learning Assessment (PLAR): is ongoing for RNs participating in the program.
• Educational courses: are being offered through Saskatchewan Polytechnic to become licensed as an RN(AAP).
• RN Specialty Practices (RNSP): the SRNA has enhanced engagement with members and employers, offering webinars, face-to-face meetings and individual consultations to increase awareness, understanding and utilization of RNSPs. Upcoming LeaRN program live and recorded webinars are available on the nursing resources page of the SRNA website: http://www.srna.org/24-main-section/nursing-resources/345-srna-events
• SRNA practice consultants: are available for concerns or questions as transitions unfold in your workplace. Contact practiceadvice@srna.org or Linda directly at lmuzio@srna.org or 306-359-4231.

Measuring Success

The fourth RNs Leading Change project multi-year external evaluation (conducted last fall), surveyed RNs and their employers in the northern primary care sites for their perceptions of client care, the process, and its impact on client care, during the transition to RN(AAP)s. View the 2016 Report on the Leading Change Additional Authorized Practice page: http://www.srna.org/index.php/component/content/article/17-main-section/260-leading-change-additional-authorized-practice
Expanded Responsibility Rewarding for new RN(AAP)

Dre Erwin, an RN practising in Northern Saskatchewan is one of the recently-licensed RN(AAP)s now providing enhanced care to residents. He’s enjoying managing the primary care needs of residents and the enhanced integrity achieving Additional Authorized Practice licensing has provided.

My journey in the north began 12 years ago as a casual employee. Now working permanent full time, I had the opportunity to go through the Prior Learning and Assessment Recognition (PLAR) process so I can practice as an RN(AAP).

It was very rewarding, despite my initial hesitation to change what seemed to be working well for me. The process proved I knew not only what to do in common situations, but that all nurses who work in the north follow the same specific evident-informed documents.

The process of becoming an AAP through PLAR ensured I reviewed and proved I knew what the best practice was, even in unfamiliar situations. It was an excellent opportunity to review guidelines for assessing, diagnosing, and treating, and it ensures safe and competent standardized care in the north.

We use Clinical Decision Tools (CDTs) on a daily basis, routinely guiding our decisions and providing us with insight such as when to order prescriptions, when to do blood work, and when we should consult an NP or MD. It bolsters the integrity of our profession, using an evidence-based approach to planning, implementing and evaluating the care we deliver according to SRNA standards and the CNA Code of Ethics. For many situations, it allows for increased autonomy frequently resulting in faster and more efficient client care.
‘Survey Says’ Competence Assurance Process 2016

At the conclusion of an investigation, the SRNA Investigation Committee conducts a voluntary survey of the participants, to assess if the process was fair and unbiased, timely, transparent, effective and confidential. Obtaining the feedback from the participants about the experience is essential to ensuring the integrity of the Competence Assurance Process (CAP).

About the Survey

Identical surveys are sent to the person submitting a report/complaint regarding the professional competence and/or conduct of an SRNA member and to the member who was the subject of the investigation. For confidentiality purposes there is no identification requested or indicated on the survey.

2016 Survey Stats January 1 to December 31, 2016

A total of 77 surveys were sent out to participants with a return rate of 32% for all participants.
Competence Assurance Process 2016 continued

Measuring the Process

Comparative Measurement of Competence Assurance Process Core Tenets

88% of all participants felt sufficient information was provided to understand the CAP.

Applying the Results

These metrics will continue to be monitored on an annual basis for quality improvement purposes.

Learn more about ‘Survey Says’ and the CAP, visit http://www.srna.org/index.php/rn-competence
SRNA Practice Consultation Services

Your input supports the integrity of Practice Consultation Services

SRNA Practice Consultation Services (PCS) are designed to enhance and promote safe, ethical and competent practice by providing advice, tools, and resources to empower SRNA members to resolve professional practice issues and concerns. To ensure the practice consultation services are effective in meeting the needs of our members and stakeholders, an online survey enables users to provide their feedback.

Your feedback leads to changes

Based on what SRNA heard in the 2015, SRNA implemented several changes:
- Exploring ways to improve visibility of PCS as part of the SRNA Web Refresh project.
- Offering Webinar Wednesday and other educational opportunities.
- Participating in virtual and face-to-face consultations, focus groups, and meetings with members/stakeholders.
- Striving to achieve a response time of one business day to all initial inquiries.

Emerging Themes

- Helpful resources
- Timely response
- Knowledgeable, professional advisors

Opportunities for Improvement

- Information/advice provided should be more specific to the question and/or context provided.
- More up to date resources available.
- Improve consistency of responses from advisors based on the applicable topic area.

What we heard in 2016

82.5%
believe it is very or extremely important for the SRNA to provide practice consultation services.

76.3%
agreed or strongly agreed they were provided the information or resources needed to address their query.

72%
rated the quality of the information or resources as good or excellent.

86%
would recommend the practice consultation services to someone else.

82.5%
agree or strongly agree they were provided the information or resources needed to address their query.

76.3%
rated the quality of the information or resources as good or excellent.

86%
would recommend the practice consultation services to someone else.
Webinar Wednesdays a LearRN-ing Success

LeaRN is the continuing education program the SRNA established to provide ongoing educational opportunities for members. In 2016 we introduced Webinar Wednesdays, a weekly webinar providing information on a variety of nursing and professional practice topics. Some of the topics included were RN(AAP) Licensure, Using the Three Factor Framework for Assignment of Care, RN Specialty Practices and Nominating a Colleague for SRNA Council. Participants were invited to provide feedback on the webinar they attended and their feedback has been positive.

Value by the Numbers

• 82.6% were satisfied or very satisfied with the webinar they attended
• 86.9% felt the webinar added to their understanding of the topic
• 91.3% felt the webinar provided the information or resources to support their practice of safe, competent, ethical and culturally appropriate care.

In Their Words

• “We were better able to provide this information to more of our nurses and to enable a good discussion following.”
• “The questions helped me to validate my understanding.”
• “I could care for my young child and still participate/listen to the presentation.”

What’s in Store for 2017

• A consistent link to our standards and competencies with an aim to provide topics related to areas you are working on for your individual learning plan.
• A slate of topics available on our website well ahead of the date of presentation.
• Continued partnerships with stakeholders and members to bring you more guest presenters, in response to positive feedback in 2016.

If you are an RN wishing to expand your current skill set and knowledge base and thrive in a high-intensity environment, a career in emergency nursing might be the path for you. This 15-week advanced certificate program will prepare you to make safe and effective clinical decisions while being flexible and adaptable to a fast-paced, unpredictable and ever-changing environment using principles of resilience.

For more information, call 306-775-7445 or toll free 1-866-467-4278 or email emergencynursing@saskpolytech.ca.
ADVANCE YOUR NURSING CAREER
WITH A POST-GRADUATE CERTIFICATE IN OCCUPATIONAL HEALTH NURSING

Saskatchewan Polytechnic’s Occupational Health Nursing (OHN) post-graduate certificate program is designed for nurses who currently practice or are considering a nursing career in the health and safety industry. We recognize that OHNs have diverse and specialized skills that allow them to lead and encourage safety, health promotion and well-being in the workplace.

ADVANCE YOUR KNOWLEDGE IN OUR FLEXIBLE ONLINE LEARNING ENVIRONMENT:
• Learn online and study at a time and location that is convenient for you.
• Participate in online discussion forums and other activities that allow you to connect with colleagues and industry specialists.
• Complete eight courses, and a multi-day OHN lab.
• Complete an 80-hour field work experience, in an approved and suitable location near your home.

The program is designed to encourage learners throughout their OHN career – from novice to advanced practitioners. Your studies will focus on health assessment, health promotion, safety and project management, occupational hygiene, disability management, and leadership. Workplace health and wellness is a key theme throughout your studies.

The OHN program has three class offerings/intakes per year (fall, winter and spring). For a list of courses, prerequisites and admission requirements, visit SaskPolytech.ca/nursing.

FOR MORE INFORMATION:
Call 306-775-7773 or email nursingconed@saskpolytech.ca.
The University of Regina and Saskatchewan Polytechnic are proud to provide quality nursing education. Our Saskatchewan Collaborative Bachelor of Science in Nursing (SCBScN) and Collaborative Nurse Practitioner Program (CNPP) would not be successful without the continuing support of Saskatchewan’s nurses.

On behalf of Saskatchewan Polytechnic and the University of Regina, we thank the nurses of Saskatchewan for your ongoing support and wisdom. With your guidance and mentoring, we will ensure that the next generation of nursing professionals continue Saskatchewan’s tradition of health care excellence.

sasknursingdegree.ca
Only the Exciting Stuff you Need to Know About Neuro Anatomy
- Why TIME is BRAIN; Neurogenesis and Plasticity
- A Brief Tour of your Brain and Cranial Nerves
- Blood Supply to the Brain and Spinal Cord

The Clinical Profile of Ischemic Strokes
- Thrombotic Strokes & Embolic Strokes
- Carotid Stenosis; Atrial Fibrillation
- Symptoms & Incidence
- Modifiable and Non-Modifiable Risk Factors

The Clinical Profile of Hemorrhagic Strokes
- Aneurysms and Arteriovenous Malformations
- Symptoms & Incidence
- Modifiable and Non-Modifiable Risk Factors

Transient Ischemic Attacks!
- Relevance to Strokes; Symptoms & Treatment

Managing the Risk Factors - Control the Hyper!
- Hypertension: BP Management; Considerations for the Elderly
- Hypercholesterolemia, Medication
- Hyperglycemia: Obesity, Inactivity & Alcohol
- Hypercoagulability: The Pill, Obesity and Clotting Risk
- A Word about Brain Boosters

Treatment and Management of Strokes
- Stroke Scales; Recommended Stroke Evaluation Time
- Labs & Imaging Studies
- Current fibrinolytic Therapies; Recanalization; Intra-arterial r-PA
- Mechanical Thrombectomy; MERCI Retriever & Penumbra Device
- Post Stroke Depression

Strokes in Children & Young Adults

Who Should Attend?
- Medical, Surgical, ICU, and ER Nurses
- Acute & Long Term Care Nurses in Urban & Rural Settings
- Rehabilitation and Special Care Unit Nurses
- Rehabilitation Therapists with an Interest in Stroke

Managing Stress in the Workplace 
- Strategies to help manage stress in the workplace
- Techniques to improve focus and productivity

To register: Call toll-free 1.866.738.4823 or visit NursingLinks.ca

Barb Bancroft is a widely acclaimed nursing teacher who has taught courses on Advanced Pathophysiology, Pharmacology, and Physical Assessment to both graduate and undergraduate students. Also certified as a Pediatric Nurse Practitioner, she has held faculty positions at the University of Virginia, the University of Arkansas, Loyola University of Chicago, and St. Xavier University of Chicago. Barb is known for her extensive knowledge of pathophysiology and as one of the most dynamic nursing speakers in North America today. Delivering her material with equal parts of evidence based practise, practical application, and humour, she has taught numerous seminars on clinical and health maintenance topics to healthcare professionals, including the Association for Practitioners for Infection Control, The Emergency Nurses Association, the American Academy of Nurse Practitioners, and more.

Stacy Holloway is a skilled interventionist in the fields of Human Relations and Organizational Development. Stacy focuses her talents and energy on organizational development - particularly, change education, change strategy consulting, and change leadership development. A graduate of UBC and Senior Trainer at the BC Justice Institute in the Centre for Conflict Resolution, she is an in-demand speaker. Stacy has conducted seminars for thousands across Canada and the United States. Her active, participatory seminars are charged with energy, humour, and creativity.

STACEY HOLLOWAY, BScN

Why is it that some people at work can be sensible and calm one minute and totally irrational the next? Why is it that some people will fight you every step of the way - you ask them to go right and they go left? Why do people do things to make their jobs so much harder than they need to be? And, what can you do when they try to do them to you? What is it about manipulative people - those who are pushy and aggressive, who take offense easily, who whine - that makes them so powerful? If work is work, why do we take things so personally? Is there anything you can do to deal with these and other types of difficult behaviour in today’s workplace? No one enjoys dealing with difficult people, yet it is an everyday part of life. This one day workshop and the ideas presented can help you skillfully disarm disagreeable people so your personal and professional relationships are less stressful and more enjoyable.

To register: Call toll-free 1.866.738.4823 or visit NursingLinks.ca

$179.00 + $8.95 GST = $187.95 Middle Rate (on or before April 10, 2017)
$189.00 + $9.45 GST = $198.45 Regular Rate (after April 10, 2017)

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Infectious Diseases Update
Shampoos, Tattoos, and Barbecues: What’s New in the World of Infectious Disease?

SASKATOON, May 15, 2017

Immunizations And Vaccines: The “Need To Know” Info
- Pediatric & Adult Immunization; Herd Immunity; Pertussis
- Tdap; Zostavax; HPV Vaccines
- Meningococcal Vaccine

Global Warming, Global Travel, & The Patient With Travel History
- The Implications of Migration of Mosquitoes Away From The Equator
- Infectious Diseases and Airplanes - What’s The Risk?
- Transportation of Food Across Borders - Is There a Problem?

Major Food-borne Illnesses & Their Sources; Treatment
- The Dreaded E. Coli 0157:H7, Salmonella
- Campylobacter jejuni;Listeria Monocytogenes

The Perils Of Antibiotic Misuse, Overuse, & Abuse
- Increasingly Dangerous Drug Resistant Bacteria, MRSA, CRE, VRE
- Mutations Of Bacteria - the Difficult C. Difficile; Antimicrobial Stewardship

Infectious Disease Trends Throughout the World that Show Up in Your Patient Population
- The Role of Sexual Transmission in Infections
- HIV Infection; HPV Infection
- Hepatitis Infections; Syphilis & Others

Will I Know It When I See It? The Presentation, Pathophysiology And Rx of Specific Infectious Diseases
- Zika: Worse Than We Thought & What You Need to Know
- Avian Flu, MERS, SARS

Fido, Boots, & Rex: The Risk Of Infectious Illness From Pets
- Exotic Pets; Dogs from Puppies Mills; Pocket Pets; Reptiles; Bites

Barb Bancroft, RN, MSN, PNP
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WHO SHOULD ATTEND?
- RNs, RPNs, LPNs; All Front Line Nursing Staff
- Infection Control, Public & Occupational Health Nurses
- Educators, Managers, NPs, & Telehealth Nurses

Few areas in healthcare are changing as rapidly as infectious diseases. This one day seminar provides an up-to-the minute update on current issues in infectious diseases. Major infectious disease trends will be reviewed, including: global warming and travel, bioterrorism, food-borne illnesses, infectious agents and their relationship to acute and chronic disease. New vaccines, new diseases, and new drugs will also be reviewed. A seminar you don’t want to miss for both your patients and your own benefit!

** Updated With New Content! **

$179.95 + $8.95 GST = $187.90 Middle Rate (on or before May 1, 2017)
$189.95 + $9.45 GST = $198.45 Regular Rate (after May 1, 2017)

Anxiety & Depression
What every nurse needs to know about...

SASKATOON, June 13, 2017

Sandra Reich, M.Ed.
Sandra Reich, M.Ed. is the Clinical Director of The Montreal Center for Anxiety & Depression, The Co-Director of Empowered Women Workshops, Co-Director of Anxiety Videos, Founder of Sandra Reich’s Empowerment Retreats as well as the host of a top weekly radio show: Straight Talk with Sandra Reich on Voice America. Sandra is also a best-selling author of “Once upon a Time- How Cinderella Grew Up & Became a Happy Empowered Woman” and well known as an expert on anxiety, relationships, family dynamics and more. She is an expert in the field of Cognitive Behavioral Therapy and holds a Master’s degree in Counseling Psychology from McGill University. She received extensive training from the Cognitive Behavioral Therapy Clinic for Anxiety Disorders at The Montreal General Hospital. In the last few years, Sandra has continued to broaden her repertoire with training in mind-body/spirit work and its benefits in Psychotherapy. Sandra’s expertise has been featured on many radio and television shows including Discovery Health’s “Accident Investigator”, Global TV’s “Good Morning Live”, the reality show “Working it out together”, “Celebirty Damage Control” which is currently airing on the Oprah Network (OWN) and is featured as expert on the upcoming series called “As a Matter of Fact” on the topic of stress.

WHO SHOULD ATTEND?
- Nurses in Clinical Settings; New Mental Health Nurses
- Nurse Managers, Nurse Educators
- Allied Professionals in Healthcare and Social Services Settings

Anxiety and Depression are two of the most widely reported disorders in Canada. This workshop will help nurses who do not work in mental health settings, tell the difference between anxiety and depression; identify the signs, symptoms and gender differences. We'll also cover therapies and treatments that will help inform the nurse to support the patient or client while they are being referred for treatment to the right mental health professional. On the flip side, nurses as caregivers, can be especially vulnerable to giving too much, resulting in the self-effacement of their own needs. Join Sandra Reich, M.Ed. for this amazingly informative day on anxiety, depression, how to avoid typical caregiver traps and some much needed tips empowering yourself in your practise.

** Back by Popular Demand! **

$179.95 + $8.95 GST = $187.90 Early Rate (on or before May 1, 2017)
$189.95 + $9.45 GST = $198.45 Middle Rate (on or before May 29, 2017)
$199.95 + $9.95 GST = $208.95 Regular Rate (after May 29, 2017)
Liver Logic: Fifty Ways to Love Your Liver

SASKATOON, September 26, 2017

Barb Bancroft, RN, MSN, PNP

Barb Bancroft is a widely acclaimed nursing teacher who has taught courses on Advanced Pathophysiology, Pharmacology, and Physical Assessment to both graduate and undergraduate students. Also certified as a Pediatric Nurse Practitioner, she has held faculty positions at the University of Virginia, the University of Arkansas, Loyola University of Chicago, and St. Xavier University of Chicago. Barb is known for her extensive knowledge of pathophysiology and as one of the most dynamic nursing speakers in North America today. Delivering her material with equal parts of evidence based practise, practical application, and humour, she has taught numerous seminars on clinical and health maintenance topics to healthcare professionals, including the Association for Practitioners for Infection Control, The Emergency Nurses Association, the American Academy of Nurse Practitioners, and more.

WHO SHOULD ATTEND?

- Medical, Surgical, Perioperative and Critical Care Nurses
- Nurse Practitioners, Primary Care Nurses, TeleHealth Nurses
- Nurses in Blood Services, Infection Control, & Public Health
- Home Care & Long Term Care Nurses; Occupational Health Nurses
- Dietitians, Pharmacists, Nurses in Diagnostic Imaging

Did you know that the liver has 500 functions and that it can regenerate itself within 30 days? Listen to Barb's fascinating lecture on the liver in all its glory. Barb takes you for a journey through an amazing organ that we tend to take for granted. She'll review the metabolic and the synthetic functions, she'll discuss the signs and symptoms of liver disease and the most important lab tests. She'll also discuss all the types of hepatitis and cirrhosis, acute and chronic liver failure and NAFLD and NAS and discuss the newest advances in the treatment of liver disease. You will not only gain a new respect for this 3.5-pound football-sized organ, you will also realize that it is just as important as the more celebrated organs of the heart, lungs, brain, and kidney. You gotta love your liver!

**Brand New Topic!**

Pharmacology Update for Nurses

REGINA, October 24, 2017

Barb Bancroft, RN, MSN, PNP

Barb Bancroft is a widely acclaimed nursing teacher who has taught courses on Advanced Pathophysiology, Pharmacology, and Physical Assessment to both graduate and undergraduate students. Also certified as a Pediatric Nurse Practitioner, she has held faculty positions at the University of Virginia, the University of Arkansas, Loyola University of Chicago, and St. Xavier University of Chicago. Barb is known for her extensive knowledge of pathophysiology and as one of the most dynamic nursing speakers in North America today. Delivering her material with equal parts of evidence based practice, practical application, and humour, she has taught numerous seminars on clinical and health maintenance topics to healthcare professionals, including the Association for Practitioners for Infection Control, The Emergency Nurses Association, the American Academy of Nurse Practitioners, and more.

WHO SHOULD ATTEND?

- RNs, NPs, RPNs, & LPNs in All Areas
- Acute & Critical Care, Special Care Areas
- Geriatric, Home, Community, and Primary Care
- Outpost Nurses, Occupational Health Nurses; Transition Coordinators
- Nurse Practitioners, Tele-Health Nurses, Educators, Managers

There are a staggering number of drugs that nurses are expected to keep current with. Without some systematic way of categorizing the information, it's easy to become overwhelmed by such a vast amount of information. This course is aimed at simplifying the volume of drug information into easier recall and to crystallize the key things you need to know about the major categories of drugs. And as always, a day with Barb Bancroft will include humour along with important clinical applications that will help you remember and apply the material on a daily basis in your clinical setting.

**Updated with NEW Content!**

9000 Drugs, Where to Start? Differentiate Quickly Among the Classes of Drugs with the "Suffix" of Each Class

- The "statins", the "prils", the "triptans" and the "sartans"
- The "prazosins" and the "aflas"
- The "olits", the "alits", the "dolits" and the "dipenes" - The "coxibs" the "muchs", and the "gluatinzes"
- The "vasozolts", the "cyclophones" and more

Clinical Uses and Mechanism of Action: The Key Things You Need to Know

- Analgesics; Drugs for Diabetes; Targeted Therapies
- Cholesterol-Lowering Agents, Anti-Hypertensives
- Anti-Fungal and Anti-Viral Agents

Understanding the Common Treatment Regimens for Selected Clinical Conditions

- Hypertension; Chronic Heart Failure
- Diabetes Mellitus Type 2
- Depression

You're Taking WHAT?? Clinical Interactions Between Drugs, Alternative Therapies and Food

- The Effect of Grapefruit Juice on the Metabolism of Certain Drugs
- Foods with Potassium, Foods with Vitamin K
- St John's Wort

Specific Mechanisms of Actions of Drugs in Popular Use

- The "Highway System" and the "prils"
- The Nocturnal Liver and the "statins"
- The Proton Pump and the "prazosins"
# Payroll Investment Plan (PIP)

**Turn $57 per paycheque into a $5,000 annual RRSP investment in a strong Saskatchewan!***

Add to your retirement savings.

<table>
<thead>
<tr>
<th>Without the Payroll Investment Plan</th>
<th>With the Payroll Investment Plan</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Regular Pay per Period</strong> (before deductions)</td>
<td>$2,076</td>
</tr>
<tr>
<td>Less: CPP and EI</td>
<td>$135</td>
</tr>
<tr>
<td>Less: Income Tax*</td>
<td>$400</td>
</tr>
<tr>
<td><strong>Your Investment into Golden Opportunities Fund</strong></td>
<td>$0</td>
</tr>
<tr>
<td><strong>Net Take-home Pay</strong></td>
<td>$1,541</td>
</tr>
</tbody>
</table>

Redirect $135 of Income Tax to your Golden Opportunities Fund investment.

Out of pocket net cost of only $57 per pay period*.

*By combining the provincial and federal tax credits with the RRSP tax savings attached to the Fund, a biweekly contribution of $57 can result in a $5,000 investment every year. Based on an annual RRSP investment, 26 pay periods per year, basic personal tax exemptions and a marginal tax rate of 35% (minimum taxable income of $44,029). Amount will vary according to your tax bracket. This is not intended to be tax advice; investors should seek a professional for tax advice. SOLD BY PROSPECTUS ONLY. Please read the Prospectus, which contains important detailed information, before investing. A free copy is available from your Financial Advisor or the Principal Distributor, National Bank Financial Inc., Member of the Canadian Investor Protection Fund, at info.nbfinancial.com. Commissions, trailing commissions, management fees and expenses all may be associated with Retail Venture Capital (RVC) Fund investments which may not be suitable for all investors. RVCs are not guaranteed, their values change frequently and past performance may not be repeated. Tax credits are available to eligible investors on investments up to $5,000 annually, provided that the shares are held for at least eight years from the date of purchase. Redemption restrictions may apply. This is not intended to be tax advice; investors should seek a professional for tax advice.
Join Us For the SRNA Annual Meeting, Education Conference and Awards Banquet

The SRNA Annual Meeting is an important event that brings our membership together to celebrate our successes and embrace a united vision for our priorities.

In line with our commitment to accountability, transparency and effectiveness as we ensure competent and safe RN and RN(NP) care for our patients, residents, clients and their families, we also invite the public to attend.

The Annual Meeting provides an opportunity for our members to put forward resolutions that help advance, innovate and optimize RN and RN(NP) evidence-informed practice and healthy public policy. Information about tabling resolutions is included on page 5 of this News Bulletin.

This year’s event will also celebrate 100 years of profession-led regulation for Registered Nurses in Saskatchewan! More information regarding the Education Conference (May 3) and Awards Banquet (May 3) is available on our website.

We look forward to welcoming our members, health system partners and the public on May 3rd and 4th in Saskatoon.

For more information about the Annual Meeting visit: http://www.srna.org/communications/annual-meeting-conference