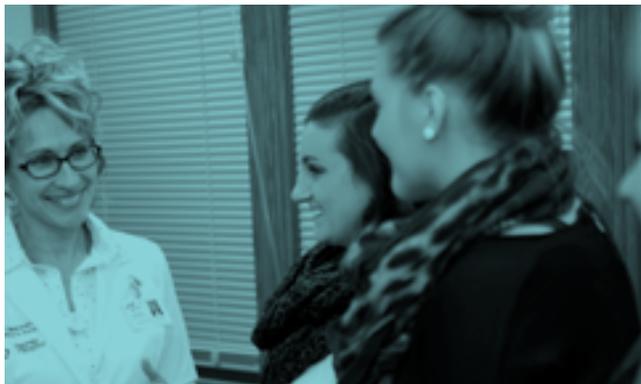


# Saskatchewan Registered Nurses' Association

# Bylaws

## 2016



*The Registered Nurses Act, 1988* and the bylaws and the policies of the SRNA work together to regulate the profession of nursing. The bylaws must conform with the Act, and the policies must conform with both the Act and the bylaws. Sections 14-16 of the Act define what bylaws may be developed. Bylaws must be approved by the Council and the members present at an annual meeting. Regulatory bylaws must also obtain approval from the Minister of Health. Policies must be approved by Council.

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## BYLAW I - COUNCIL OF THE ASSOCIATION

### SECTION 1. ELIGIBILITY.

- (1) Practicing members of the association may be elected as members of the council with the following exceptions:
  - (a) employees of the association shall not hold elected office;
  - (b) elected officers shall not hold the same office for more than two consecutive terms.

### SECTION 2. TERM OF OFFICE.

- (1) Subject to section 2(6), (7) and (8), the term of office for the president shall be two years and shall begin at the close of the annual meeting at which the member's term as president-elect expires.
- (2) The term of office for the president-elect shall be two years and shall begin at the close of the annual meeting at which the member is elected the president-elect.
- (3) The term of office for council members-at-large shall be three years and shall begin at the close of the annual meeting at which the member is elected.
- (4) As a transitional measure, the terms of council members-at-large from Electoral Regions #03 and #07 holding office at the opening of the annual meeting in 2012 shall be extended to 2013.
- (5) The council shall request the replacement or reappointment of a public representative in accordance with the Act.
- (6) The president-elect succeeds to the office of president on the expiry or termination of the president's term of office and thereafter continues in office as the president of the association in accordance with section 2 (7) and (8).
- (7) If the president-elect succeeds to the office of president during the first year of the previous president's term, the person:
  - (a) holds office as president for the remainder of the predecessor's term of office, and
  - (b) continues in office thereafter as president for a one year term of office.

(8) If the president-elect succeeds to the office of president during the second year of the previous president's term, the person:

- (a) holds office as president for the remainder of the predecessor's term of office, and
- (b) continues in office thereafter as president for a two year term of office.

### SECTION 3. POWERS AND FUNCTIONS.

(1) The council shall govern, manage and regulate the affairs and business of the association and without restricting the generality of the foregoing shall:

- (a) establish policies as necessary to further the goals of the association;
- (b) establish policies regarding examinations, registration and licencing, temporary licencing, and the admission of members;
- (c) establish policies regarding the investigation and discipline committees of the association;
- (d) establish policies governing the financial affairs of the association including the management of surplus funds;
- (e) establish policies governing the appropriation, investment and disbursement of the funds of the association;
- (f) establish policies governing the proposed budget of the association;
- (g) recommend to the association revisions and amendments to the bylaws;
- (h) participate in the public relations program of the association;
- (i) establish a mechanism for regularly evaluating the association;
- (j) submit to each annual meeting of the association an audited financial statement of the operations of the association for the past calendar year, which is the fiscal year of the association; and
- (k) link with members and the public.

#### SECTION 4. REMOVAL FROM OFFICE.

- (1) Elected members of council, and elected or appointed members of association committees or membership units, whose conduct or activity is detrimental to or incompatible with the objects and policies of the association may be removed or suspended from office.
- (2) The matter shall be dealt with by the council upon written request from five members of the association.
- (3) Notice of motion for removal or suspension of any member must be given to the member concerned and to all members of the particular committee or group and all members of the council 30 days before the council meeting.
- (4) The motion to remove or suspend must be passed by a two-thirds vote at the council meeting.

#### SECTION 5. COUNCIL MEETINGS.

- (1) Meetings of the council shall be called by the president or as arranged at a previous meeting of the council with not less than four meetings being held between annual meetings.

#### SECTION 6. PRESIDENT.

- (1) The president shall:
  - (a) preside as chairperson at all general and special meetings of the association, and of the council;
  - (b) perform all acts and deeds pertaining to this office;
  - (c) be accountable for the integrity of the council's process;
  - (d) represent the council to outside parties; and
  - (e) represent the association on the board of the Canadian Nurses Association (CNA).
- (2) The president may delegate to the immediate past-president continuing representation on the CNA board until September of the president's initial year.

SECTION 7. PRESIDENT-ELECT.

- (1) The president-elect shall:
  - (a) in the absence of the president perform the duties of the president;
  - (b) act as chairperson of the legislation and bylaws committee;
  - (c) perform such duties as may be assigned by the council or the president; and
  - (d) succeed to the office of president.

SECTION 8. MEMBERS-AT-LARGE.

- (1) The members-at-large shall:
  - (a) in the absence of the president and president-elect, choose one of their members to perform the duties of the president; and
  - (b) perform such duties as may be assigned by the council or the president.

SECTION 9. PUBLIC REPRESENTATIVE.

The public representatives shall:

- (a) represent the views of the people of Saskatchewan on matters before the council;
- (b) report to the council on public concerns; and
- (c) perform such duties as may be assigned by the council or the president.

SECTION 10. EXECUTIVE DIRECTOR.

(1) The executive director shall be a registered nurse appointed by and accountable to the council and shall:

- (a) carry out the policies established by council pertaining to the management and administration of the affairs of the association;
- (b) act as treasurer of the association:
  - (i) ensure the complete and accurate accounts are kept;
  - (ii) make a financial report to the council quarterly and to the membership at the annual meeting;
- (c) act as secretary of the association:
  - (i) keep all records of the association, including a record of all meetings of the association and the council;
  - (ii) notify all members of all regular and special meetings, and send out to members appropriate information and documentation prior to any special or annual meeting;
  - (iii) issue all notices required by statute, by these bylaws, or by resolution of the council;
- (d) be responsible for employment, assignment and supervision of staff, and the administration of salaries;
- (e) be an ex-officio non-voting member of all council committees with the exception of the nominations committee and the statutory committees;
- (f) have custody of the seal of the association.

SECTION 11. SIGNING OFFICERS.

- (1) Signing officers shall include the president, the executive director, and three or more appropriate staff as required.
- (2) Cheques shall be co-signed by two signing officers of the association.

## BYLAW II - ELECTIONS

### SECTION 1. ELECTION OF COUNCIL.

- (1) For the purposes of clause 7(2)(a) of the Act, the total number of practicing members to be elected to comprise the council is nine, including:
  - (a) the president;
  - (b) the president-elect; and
  - (c) one member-at-large from each of the seven electoral regions established pursuant to Section 1(2).
  
- (2) The electoral regions for election of members-at-large in the association are the following:
  - (a) Electoral Region #01, consisting of the area comprising the Cypress and Heartland Health Regions;
  - (b) Electoral Region #02, consisting of the area comprising Five Hills and Sun Country Health Regions;
  - (c) Electoral Region #03, consisting of the area comprising Prairie North and Prince Albert Parkland Health Regions;
  - (d) Electoral Region #04, consisting of the area comprising Kelsey Trail and Sunrise Health Regions;
  - (e) Electoral Region #05, consisting of the area comprising Mamawetan Churchill River, Athabasca, and Keewatin Yatthé Health Regions;
  - (f) Electoral Region #06, consisting of the area comprising Saskatoon Health Region; and
  - (g) Electoral Region #07, consisting of the area comprising Regina Qu'Appelle Health Region.
  
- (3) The president-elect shall be elected in odd years.

- (4) Council members-at-large from Electoral Regions #01, #02 and #05 shall be elected in 2011 and every three years thereafter.
- (5) Council members-at-large from Electoral Regions #04 and #06 shall be elected in 2012 and every three years thereafter.
- (6) Council members-at-large from Electoral Regions #03 and #07 shall be elected in 2013 and every three years thereafter.
- (7) In the case of a vacancy during the first or second year of the term of a council member-at-large, an election shall be held at the next annual meeting to fill the remainder of the unexpired term.
- (8) For greater certainty, the health regions mentioned in subsection (2) are the health regions established pursuant to section 13 of *The Regional Health Services Act*, the names of which have been changed in accordance with section 22 of that Act as follows:
  - (a) Sun Country Health Region is Health Region #1;
  - (b) Five Hills Health Region is Health Region #2;
  - (c) Cypress Health Region is Health Region #3;
  - (d) Regina Qu'Appelle Health Region is Health Region #4;
  - (e) Sunrise Health Region is Health Region #5;
  - (f) Saskatoon Health Region is Health Region #6;
  - (g) Heartland Health Region is Health Region #7;
  - (h) Kelsey Trail Health Region is Health Region #8;
  - (i) Prince Albert Parkland Health Region is Health Region #9; and
  - (j) Prairie North Health Region is Health Region #10.

## SECTION 2. POLLING DAY.

- (1) Polling day for the election of members of council and elected members of the nominations committee to be elected in any year is the first day of each annual meeting of the association.

### SECTION 3. NOMINATIONS.

- (1) At least 90 days prior to polling day, the nominations committee established pursuant to Bylaw IX, Section 6, shall submit its list of nominations to the executive director so that the ballot can be prepared.
- (2) All nominations must be accompanied by the written consent of the nominees.
- (3) A person must live or work in the electoral region in which they are nominated.
- (4) Notwithstanding subsection (3), where no nomination is received in an electoral region for election of a member-at-large, each candidate nominated for election as a member-at-large in all other electoral regions shall be invited to allow his or her name to stand for election in the electoral region where no nomination is received, as well as in the electoral region in which he or she was originally nominated.

### SECTION 4. BALLOT.

- (1) Council shall prescribe the form of the ballot, which shall contain instructions to vote as set out in these bylaws, on which the names of all nominees shall be placed in the alphabetical order of their surnames.
- (2) The executive director shall, at least 30 days before polling day, or as soon as possible in the case of a member registered after that day, mail or deliver to each member who is eligible to vote a secure ballot.

### SECTION 5. VOTING.

- (1) Each member who votes shall:
  - (a) vote for the required number of candidates to fill each vacancy, as indicated on the ballot, by marking an "X" opposite the name of the candidate of the member's choice; and
  - (b) deliver the ballot to the executive director in a secure manner or deposit the ballot in the ballot box at the annual meeting before noon on polling day.

### SECTION 6. COUNTING THE BALLOTS.

- (1) In order to be counted, ballots must reach the executive director by noon on polling day.

- (2) The executive director shall appoint at least two scrutineers, and any candidate for election is entitled to have a scrutineer present when the ballots are counted.
- (3) The executive director or his or her designate shall certify the eligibility of each voter and shall deliver the secure ballots to the scrutineers who shall count the votes and report the result of the vote to the executive director.
- (4) In the case of a tie vote for any office, the president shall cast the deciding vote.
- (5) If a candidate for member-at-large is elected in more than one electoral region, the candidate shall be declared elected in his or her region of residence and the candidate with the next highest number of votes in the other region shall be declared elected in that other region.

## **BYLAW III - MEETINGS OF THE ASSOCIATION**

### **SECTION 1. ANNUAL MEETING.**

- (1) Notice of the annual meeting shall be provided to the membership at least 60 days prior to the date of the meeting.
- (2) Notice of the annual meeting shall be provided to the public.
- (3) The annual report shall be available to members of the association at least 14 days prior to the date of the meeting.
- (4) Copies of the annual report shall be made available to the public upon request.

### **SECTION 2. SPECIAL MEETINGS.**

- (1) Notice of a special meeting shall state the business to be considered at such meetings.

### **SECTION 3. QUORUM.**

- (1) A quorum for any annual or special meeting shall be the number of practicing members present.

### **SECTION 4. VOTING.**

- (1) All questions voted on at a meeting of the association, shall be decided by a majority vote of the practicing members present.
- (2) Notwithstanding subsection (1), votes at a meeting of the association relating to the making, confirming, varying, or revoking of any bylaw shall be decided by a two-thirds majority vote of the practising members present.
- (3) Each practising member shall be entitled to one vote.
- (4) Eligibility to vote at a meeting of the association shall be determined by validation of current practicing membership.

SECTION 5. PARLIAMENTARY AUTHORITY.

- (1) The rules and procedures of the association will be in accordance with the most recent publication entitled "Procedures for Meetings and Organizations" by Kerr and King and shall apply to every annual and special meeting as set out in the Rules and Procedures for Annual Meetings of the association.
  
- (2) The rules and procedures may be amended or suspended at any annual meeting by a two-thirds majority vote of the practicing members at the annual meeting.

## BYLAW IV - MEMBERSHIP

### SECTION 1. CATEGORIES OF MEMBERSHIP.

- (1) Membership in the association shall consist of the following categories:
  - (a) practicing membership;
  - (b) graduate nurse membership;
  - (c) non-practicing membership;
  - (d) life membership;
  - (e) honorary membership;
  - (f) student membership;
  - (g) inactive membership;
  - (h) retired membership;
  - (i) emergency practicing membership; and
  - (j) courtesy educator practicing membership

### SECTION 2. PRACTICING MEMBERSHIP.

- (1) Registration as a practicing member of the association shall be:
  - (a) limited to the nurse who is eligible for a licence to practise registered nursing issued by the association in accordance with the Act; and
  - (b) granted upon completion of the prescribed application form and payment of the fees set by the association in the method prescribed by council.
- (2) Practicing membership entitles a person to the following privileges:
  - (a) to practise registered nursing;
  - (b) to use the title "registered nurse" or "nurse";

- (c) to receive professional liability protection;
- (d) to vote and hold office at membership unit levels and provincial levels;
- (e) to participate in the annual meeting of the association;
- (f) to be appointed to committees at membership unit levels and provincial levels;
- (g) to use the consulting and counselling services of the association;
- (h) to receive financial assistance for purposes specified in the policies of the association;
- (i) to receive a copy of association documents designated for distribution to practicing members;
- (j) to receive the newsbulletin of the association; and
- (k) to receive all privileges of membership in affiliated national and international associations.

(3) Practicing membership carries obligations including but not limited to the following:

- (a) to adhere to the Canadian Nurses Association *Code of Ethics for Registered Nurses* contained in bylaw XIV;
- (b) to adhere to the nursing standards and competencies for the practice of registered nursing contained in bylaw XV; and

(c) To immediately report

(i) a conviction or finding of guilt for any criminal offence under the *Criminal Code* (Canada), the *Controlled Drugs and Substances Act* (Canada) or any similar legislation in any province, territory, state, or country, or any offence in relation to the practice of nursing or another profession in any jurisdiction; and

(d) each practising member including those who hold an emergency or courtesy educator membership must hold and maintain liability protection.

### SECTION 3. GRADUATE NURSE MEMBERSHIP.

- (1) Registration as a graduate nurse member of the association shall be:
  - (a) limited to the nurse who is eligible for a temporary licence to practise registered nursing issued by the association in accordance with the Act; and
  - (b) granted upon completion of the prescribed application form and payment of the fees set by the association.
  
- (2) Graduate nurse membership entitles a person to the following privileges:
  - (a) to practise registered nursing under the supervision of a registered nurse in accordance with association policies and for the period specified in a temporary licence;
  - (b) to use the title “graduate nurse” or “nurse”;
  - (c) to receive professional liability protection;
  - (d) to use the consulting and counselling services of the association;
  - (e) to receive a copy of association documents designated for distribution to practicing members;
  - (f) to receive the newsletter of the association; and
  - (g) to receive all privileges of membership in affiliated national and international associations.
  
- (3) Graduate nurse membership carries obligations including but not limited to the following:
  - (a) to adhere to the Canadian Nurses Association *Code of Ethics for Registered Nurses* contained in bylaw XIV;
  - (b) to adhere to the nursing standards and competencies for the practice of registered nursing contained in bylaw XV;
  - (c) To immediately report
    - (i) a conviction or finding of guilt for any criminal offence under the *Criminal*

*Code (Canada), the Controlled Drugs and Substances Act (Canada) or any similar legislation in any province, territory, state, or country, or any offence in relation to the practice of nursing or another profession in any jurisdiction; and*

(d) to maintain liability protection.

#### SECTION 4. NON-PRACTICING MEMBERSHIP.

(1) Non-practicing membership in the association shall be:

(a) limited to the person who:

(i) has been registered as a practicing member;

(ii) was in good standing when last registered with the association;

(iii) is not currently practising registered nursing in Saskatchewan; and

(b) granted upon completion of the prescribed application form and payment of the fees set by the association.

(2) Non-practicing membership entitles a person to the following privileges:

(a) to vote and to hold office and to be appointed to committees at the membership unit level;

(b) to attend the annual meeting of the association; and

(c) to receive the newsbulletin of the association.

#### SECTION 5. LIFE MEMBERSHIP.

(1) Life membership in the association shall be:

(a) limited to a practicing member or a former practicing member of the association who is retired from registered nurse practicing membership; and

(b) granted by the council in recognition of outstanding service to registered nursing in Saskatchewan.

(2) Life membership entitles a person to the following privileges without payment of fees:

- (a) to vote and to hold office at the membership unit level;
- (b) to be appointed to committees at the provincial level;
- (c) to attend the annual meeting of the association;
- (d) to receive the newsbulletin of the association and the Canadian Nurse Journal; and
- (e) to use the title “registered nurse(retired)”, “RN(retired)”, “registered nurse (NP)(retired)”, “RN(NP)(retired)”, or “nurse (retired)” consistent with their former registration eligibility.

#### SECTION 6. HONORARY MEMBERSHIP.

- (1) Honorary membership shall be:
  - (a) limited to a non-nurse or a nurse registered outside of Saskatchewan; and
  - (b) granted by the council in recognition of distinguished service to the registered nursing profession or for valuable assistance to registered nursing in Saskatchewan.
- (2) Honorary membership entitles a person to the following privileges:
  - (a) to receive the newsbulletin of the association; and
  - (b) to attend the annual meeting of the association.

#### SECTION 7. STUDENT MEMBERSHIP.

- (1) Student membership in the association shall be:
  - (a) limited to the person who is currently enrolled in a basic registered nursing education program given in Saskatchewan and approved by the council, or given outside Saskatchewan and recognized by the council as being equivalent to a Saskatchewan registered nursing education program approved by the council; and
  - (b) granted upon completion of the prescribed application form and payment of the fees set by the association.
- (2) Student membership entitles a person to the following privileges:

- (a) to vote, hold office and be appointed to committees at the membership unit level;
- (b) to attend the annual meeting of the association; and
- (c) to receive the newsbulletin of the association.

#### SECTION 8. RETIRED MEMBERSHIP.

- (1) Retired membership in the association shall be:
  - (a) limited to the person who:
    - (i) has been registered as a practicing member;
    - (ii) was in good standing when last registered with the association;
    - (iii) is retired from registered nursing employment; and
  - (b) granted upon completion of the prescribed application form and payment of the fees set by the association.
- (2) Retired membership entitles a person to the following privileges:
  - (a) to use the title “registered nurse (retired)”, “RN(retired)”, “registered nurse (NP)(retired)”, “RN(NP)(retired)”, or “nurse (retired)” consistent with their eligibility at time of retirement;
  - (b) to vote and to hold office at the membership unit level;
  - (c) to be appointed to committees at the provincial level;
  - (d) to attend the annual meeting of the association; and
  - (e) to receive the newsbulletin of the association

## SECTION 9. CHANGE OF MEMBERSHIP STATUS.

- (1) A non-practicing or retired member may become a practicing member of the association by payment of the required fee and compliance with current bylaws and policies governing registration.
- (2) A person who has not renewed his/her membership as a practicing, non-practicing, or retired member shall become an inactive member of the association.
- (3) A person who has been suspended or expelled in accordance with the Act shall cease to be a member of the association during the period of suspension or expulsion.
- (4) An inactive member has no privileges with the association.

## BYLAW V - REGISTRATION

### SECTION 1. REGISTER.

- (1) The registrar shall:
  - (a) keep a register containing the following information for each nurse registered:
    - (i) registration number;
    - (ii) name and address;
    - (iii) category of practice;
    - (iv) licence issued;
    - (v) any additional authorized practice in the general practice category;
    - (vi) specialty, if any, in the nurse practitioner category;
    - (vii) encumbrances, conditions or restrictions on the licence; and
    - (viii) such other information as may be required; and
  - (b) record the existence of all association discipline orders, court orders of suspension, alternative dispute resolution agreements, undertakings and mediation agreements on the register, in accordance with council policy; and
  - (c) where applicable, collect the required fee for provision of a certified extract of the register, in accordance with association policy.

### SECTION 2. INITIAL REGISTRATION AS A PRACTICING MEMBER.

- (1) A person applying for initial registration as a practicing member of the association must:
  - (a) meet the requirements for registration as defined in the Act;
  - (b) complete the prescribed application forms and pay the fees set by the association in the manner prescribed by council policy;

- (c) provide references as required by the association;
- (d) provide a vulnerable sector check (VSC) pursuant to the *Criminal Records Act* of Canada conducted by the local Canadian police service where the applicant lives or by an authorized body. The VSC must have been obtained within six months preceding the filing of the application; and
- (e) disclose any outstanding allegations or findings of professional incompetence and/or misconduct in relation to the profession of nursing and/or any other profession in any province, territory, state or country.

(2) A person who has satisfactorily completed an approved registered nursing education program in Saskatchewan must, in addition to meeting the requirements of subsection 2(1):

- (a) arrange to have forwarded by the director of the program to the registrar:
  - (i) a certified copy of records outlining the theory and the clinical content of the program;
  - (ii) a statement indicating successful completion of the program; and
- (b) pass the examination, which, at the time of writing, was approved or recognized for the purposes of registration.

(3) A person who is a registered nurse from another jurisdiction in Canada must, in addition to meeting the requirements of subsection 2(1):

- (a) provide evidence of eligibility for registration and good standing in the jurisdiction where the person completed an approved registered nursing education program;
- (b) provide evidence of registration in the jurisdiction where and when the person last practiced registered nursing indicating whether or not the applicant is the subject of an investigation or any practice limitations, restrictions or conditions in that jurisdiction;
- (c) meet the English language requirement set by the association; and
- (d) provide evidence of initial registration in the jurisdiction where the person first became a registered nurse in Canada, if an approved registered nursing

education program was completed outside of Canada, indicating whether or not the applicant is the subject of an investigation or any practice limitations, restrictions or conditions in that jurisdiction.

(4) A person who has satisfactorily completed a registered nursing education program outside of Canada and who is not a registered nurse in another jurisdiction in Canada, must in addition to meeting the requirements of section 2(1) and section 3(1):

(a) arrange to have forwarded by the director of the program to the registrar:

(i) a certified copy of records outlining the theory and clinical content of the program; and

(ii) a statement indicating successful completion of the program;

(b) provide evidence of initial registration in the jurisdiction where the person completed an approved registered nursing education program indicating whether or not the applicant is the subject of an investigation or any practice limitations, restrictions or conditions in that jurisdiction;

(c) provide evidence of registration in the jurisdiction where and when the person last practiced registered nursing indicating whether or not the applicant is the subject of an investigation or any practice limitations, restrictions or conditions in that jurisdiction;

(d) meet the English language requirement set by the association; and

(e) pass the examination, which, at the time of writing, was approved or recognized for the purposes of registration.

(5) On application and where the council considers it appropriate, the council may waive the requirements of clauses 2(3)(a) or 2(4)(b).

(6) A licence to practice registered nursing may be issued to a person who meets the requirements of section 2(1) and section 2(2), or section 2(3), or section 2(4).

(7) Council may place conditions or restrictions on a licence to practice registered nursing in the general category defined at Bylaw VI, taking into account the need to protect the public, the particular circumstances of the registered nurse and the context of practice, including client population, type of care, service delivery model and staffing.

### SECTION 3. MAINTAINING ELIGIBILITY FOR REGISTRATION.

- (1) To maintain eligibility for registration as a practicing member, a nurse must:
  - (a) work in registered nursing activities approved by the association for at least eleven hundred and twenty-five hours in the five year period immediately preceding the registration year for which registration is sought; and
  - (b) hold a practicing membership with the association or a regulatory body recognized by the council while working in approved registered nursing activities for these hours to contribute to eligibility for registration.
  
- (2) A person who has not maintained eligibility for registration in accordance with section 3(1) must:
  - (a) complete a re-entry program;
  - (b) arrange to have forwarded by the director of the program to the registrar:
    - (i) a certified copy of records outlining the theory and the clinical content of the re-entry program;
    - (ii) a statement indicating successful completion of the re-entry program; and
  - (c) provide references as required by the association.
  - (d) provide a vulnerable sector check (VSC) pursuant to the *Criminal Records Act* of Canada conducted by the local Canadian police service where the applicant lives or by an authorized body. The VSC must have been obtained within the six months preceding the filing of the application; and
  - (e) disclose any outstanding allegations or findings of professional incompetence and/or misconduct in relation to the profession of nursing and/or any other profession in any province, territory, state or country.

- (3) To register for the subsequent year as a practicing member of the association a person must:
- (a) maintain eligibility for registration as set out in subsections 3(1) or 3(2); and
  - (b) complete the prescribed inventory and renewal form and submit it with the annual registration fee, in the manner prescribed by council policy, to the registrar by November 1st.
- (4) On application and where council considers it appropriate, the council may waive the requirement of section 3(1)(a).
- (5) A licence to practise registered nursing as a registered nurse may be issued to a person who meets the requirements of section 3(3).

#### SECTION 4. REGISTRATION AS A GRADUATE NURSE.

- (1) A person who is not currently qualified for registration as a practicing member may apply for registration as a graduate nurse.
- (2) To be eligible for registration as a graduate nurse the person must be a graduate of a basic registered nursing education program given:
- (a) in Saskatchewan and approved by the council, but not yet have passed the examinations prescribed and conducted pursuant to the bylaws;
  - (b) outside Saskatchewan and recognized by the council as being equivalent to a Saskatchewan registered nursing education program approved by the council, but not yet have passed the examinations prescribed and conducted pursuant to the bylaws;
  - (c) provide a vulnerable sector check (VSC) pursuant to the *Criminal Records Act* of Canada conducted by the local Canadian police service where the applicant lives or by an authorized body. The VSC must have been obtained within the six months preceding the filing of the application; and
  - (d) disclose any outstanding allegations or findings of professional incompetence and/or misconduct in relation to the profession of nursing and/or any other profession in any province, territory, state or country.

- (3) In addition to the requirements in subsection 4(2), to be eligible for registration as a graduate nurse, the person must:
- (a) complete the prescribed application forms and pay the fees set by the association;
  - (b) arrange to have forwarded by the director of the program to the registrar:
    - (i) a certified copy of records outlining the theory and the clinical content of the program;
    - (ii) a statement indicating successful completion of the program and references as required by the association;
  - (c) meet the English language requirement of the association;
  - (d) provide references as required by the association;
  - (e) where awaiting examination or the results of examination, provide evidence of application to write or of having written the examination for registration.
- (4) An initial temporary licence to practice registered nursing as a graduate nurse may be issued for a four month period to a person described in section 4(2) who meets the bylaw requirements.
- (5) A temporary licence to practice registered nursing as a graduate nurse may be renewed for a maximum of two, four month periods upon:
- (a) providing references as required by the association; and
  - (b) demonstrating that effort has been made to meet requirements for registration as a practicing registered nurse.
- (6) Council may place conditions or restrictions on a temporary licence to practice registered nursing as a graduate nurse taking into account the need to protect the public, the particular circumstances of the graduate nurse and the context of practice including client population, type of care, service delivery model and staffing.
- (7) A temporary licence is cancelled upon notice the member has failed the required examination for the third time.

## SECTION 5. EMERGENCY PRACTISING MEMBERSHIP.

- (1) A person who is a registered nurse or registered nurse (nurse practitioner) in another jurisdiction in Canada may apply for emergency practising membership in the association and must:
  - (a) hold a practicing registration as a registered nurse or registered nurse (nurse practitioner), that is not subject to any practice limitations, restrictions or conditions and
  - (b) provide proof of identity satisfactory to the association that he or she is the person named therein.
- (2) In addition to subsection (1) a person who holds a practising registration with a RN regulatory body in another jurisdiction in Canada may apply for emergency practising membership for a maximum period of 30 days, upon signing a declaration confirming that he or she is applying for emergency membership solely for the purpose of providing assistance during an emergency situation, if the minister gives the association notice that:
  - (a) a public health emergency exists in all or part of the province; and
  - (b) the services of a registered nurse or registered nurse (nurse practitioner) from outside the province are required to assist with the emergency.
- (3) Where the public emergency continues, the Registrar may grant an extension of the emergency practising membership for an additional 30 days.

## SECTION 6. COURTESY EDUCATOR PRACTISING MEMBERSHIP.

- (1) A person who is a registered nurse or registered nurse (nurse practitioner) in another jurisdiction in Canada may apply for courtesy educator practising membership to work as an educator in a registered nursing or registered nurse (nurse practitioner) program approved by council to develop curriculum or provide theory courses in on-line programming or distance delivery.
- (2) A person who meets the requirements for the courtesy educator practicing membership is eligible for registration.
- (3) The person must sign a declaration confirming that he or she is applying for courtesy educator practicing membership solely for the purpose of performing or providing the specific services approved by the association.

(4) The courtesy membership is valid for the registration year and must be renewed annually.

(5) It is a condition of registration that the person maintain a licence and provide evidence of current registration in the jurisdiction where the person currently practices and indicate he or she is not subject to an investigation in the jurisdiction where he or she is licensed at the time of granting the courtesy membership. If the registration in the other jurisdiction is suspended or cancelled, the courtesy educator practicing registration is also cancelled.

## BYLAW V.1 - CONTINUING COMPETENCE

### SECTION 1: CONTINUING COMPETENCE PROGRAM.

- (1) For the purposes of clause 38.1(1)(a) of the Act, the continuing competence program administered by the association for both the general practice and nurse practitioner membership categories is established as the program for reviewing and improving the quality of nursing care provided by members.
- (2) A registered nurse licensed in the general practice category must participate in the continuing competence program for that membership category.
- (3) A registered nurse licensed in the nurse practitioner category must participate in the continuing competence program for the general practice category as well as the continuing competence program for the nurse practitioner category.
- (4) For the continuing competence program, a registered nurse must complete, in each membership year, a reflective practice review in the form provided by the association, which includes:
  - (a) a personal assessment of the nurse's practice according to the standards and competencies applicable to the practice category;
  - (b) feedback on the personal assessment obtained by the registered nurse;
  - (c) a written learning plan developed from the personal assessment and feedback and implemented; and
  - (d) a written evaluation of the result of the learning plan on the practice of the registered nurse.
- (5) Each registered nurse shall retain his or her reflective practice review for five membership years following the end of the membership year in which the review is completed and shall produce it to the registrar at any time on request.
- (6) A registered nurse who does not complete a reflective practice review in a membership year is not eligible to be licensed to practise in the membership year next ensuing.
- (7) The registrar may suspend a registered nurse's licence to practice where the registrar determines that the registered nurse has not completed a reflective practice review in accordance with these bylaws.

## BYLAW VI - CATEGORIES OF PRACTICE

### SECTION 1. CATEGORIES OF PRACTICE.

- (1) The practice of registered nursing shall consist of the following practice categories:
  - (a) general practice category; and
  - (b) nurse practitioner category with one of the following four specialties:
    - (i) RN(NP) - Primary Care – The RN(NP) with a Primary Care Specialty provides NP services to individuals and families across the lifespan.
    - (ii) RN(NP) - Adult - The RN(NP) with an Adult Specialty provides NP services to young, middle-aged and older adults.
    - (iii) RN(NP) - Pediatrics - The RN(NP) with a Pediatrics Specialty provides NP services to children from newborn infants to toddler, school-aged children and adolescents.
    - (iv) RN(NP) - Neonatal - The RN(NP) with a Neonatal Specialty provides NP services to high risk newborns.

### SECTION 2. GENERAL PRACTICE CATEGORY.

- (1) Membership in the general practice category is limited to:
  - (a) a registered nurse who has practising membership status; and
  - (b) a graduate nurse who has graduate nurse membership status.
- (2) Additional authorized practice will be recognized for a registered nurse in good standing in the general practice category who has:
  - (a) successfully completed additional approved or recognized nursing education courses or successfully completed a prior learning assessment; and
  - (b) completed an application for authorized practice; and
  - (c) paid the requisite fees.

(3) In the course of engaging in the practice of registered nursing in the general practice category, a registered nurse with additional authorized practice may, subject to conditions or restrictions imposed on his or her licence, perform the following:

(a) in accordance with standards, competencies and clinical decision tools adopted by the association, diagnose and treat limited common medical disorders as defined in the clinical decision tools.

(b) in accordance with standards, competencies and clinical decision tools adopted by the association, order, perform, receive and/or interpret reports of screening and diagnostic tests;

(c) in accordance with standards, competencies and decision tools adopted by the association, prescribe and/or dispense drugs in accordance with provincial and federal legislation:

(i) drugs listed in Schedule I, II and III of *The Drug Schedules Regulations 1997*, as amended from time to time.

(ii) drugs in the Health Canada Non-Insured Health Benefits list, as amended from time to time; and

(iii) drugs and Natural Health Products that may be sold without a prescription.

(d) in accordance with standards, competencies and clinical decision tools adopted by the association, perform minor surgical and invasive procedures.

(4) A registered nurse with additional authorized practice shall adhere to standards, competencies and clinical decision tools listed in the association publication dated May 2013 entitled *Standards, Competencies and Clinical Decision Tools for the Registered Nurse with Additional Authorized Practice*.

#### MAINTAINING ELIGIBILITY

(5) To maintain eligibility for additional authorized practice, a general category registered nurse must:

(a) work in the additional authorized practice activities for at least 900 hours in the three years immediately preceding the registration year for which registration is sought;

(b) maintain current certification in required external courses approved or recognized by the association; and

(c) include the member's additional authorized practice activities in the reflective practice review as part of the annual continuing competence program.

(6) A registered nurse who does not complete a reflective practice review related to additional authorized practice activities in a membership year is not eligible for enrolment on the additional authorized practice register in the following membership year.

(7) The registrar may suspend a registered nurse's enrolment on the additional authorized practice register when the registrar determines that the registered nurse has not completed a reflective practice review related to additional authorized practice activities.

(8) A registered nurse who is on the additional authorized practice register, who practices less than 900 hours in the preceding three years, must satisfactorily complete additional education courses or learning activities to address the standards, competencies and clinical decision tools in the additional authorized practice.

### SECTION 3. NURSE PRACTITIONER CATEGORY.

(1) Membership in the nurse practitioner category is limited to:

(a) a registered nurse who has practicing membership status in the general practice category and who has been granted a licence to practice within the nurse practitioner category in one of the four specialties; and

(b) a registered nurse who has practicing membership status in the general practice category and who has:

(i) successfully completed a RN(NP) nursing education program approved or recognized by council in one of the four specialties;

(ii) completed an application for graduate nurse practitioner registration;

(iii) paid the requisite fees;

(iv) applied to take, or is awaiting the results of the nurse practitioner registration examinations in one of the four specialties;

(v) met all of the other requirements for registration as a graduate nurse practitioner in one of the four specialties;

(vi) provided a vulnerable sector check (VSC) pursuant to the *Criminal Records Act* of Canada conducted by the local Canadian police service where the applicant lives or by an authorized body. The VSC must have been obtained within the six months preceding the filing of the application;

(vii) disclosed on an ongoing basis any outstanding charges under the *Criminal Code* (Canada), the *Controlled Drugs and Substances Act* (Canada) or any similar legislation in any province, territory, state or country; and

(viii) disclosed any outstanding allegations or findings of professional incompetence and/or misconduct in relation to the profession of nursing and/or any other profession in any province, territory, state or country.

(2) A registered nurse who meets the requirements in section 3(1)(b) may be granted a graduate nurse practitioner licence in the nurse practitioner category in one of the four specialties.

(2.1) A graduate nurse practitioner licence allows the individual to use the title “Registered Nurse (Graduate Nurse Practitioner) RN(GNP)” and an indicator of one of the four specialties.

(2.2) A graduate nurse practitioner shall be supervised by a nurse practitioner registered with the association or by a physician in good standing with the College of Physicians and Surgeons of Saskatchewan.

(2.3) The graduate nurse practitioner licence is issued for a maximum period of eight months to allow the individual to write the nurse practitioner examination in one of the four specialties, receive the examination results and obtain the nurse practitioner registration in one of the four specialties.

(2.4) The graduate nurse practitioner licence may be renewed for a maximum period of eight months to allow the individual who was unsuccessful on the first writing of the registration examination to rewrite the examination in one of the four specialties upon receipt by the registrar of:

(a) a satisfactory reference from a nurse practitioner or a physician working directly with the individual; and

(b) a letter from the employer agreeing to continue to provide supervision by a nurse practitioner registered with the association or a physician in good standing with the College of Physicians and Surgeons of Saskatchewan.

(c) the graduate nurse practitioner licence is cancelled upon failing the required examination on the third attempt.

(3) In the course of engaging in the practice of registered nursing in the nurse practitioner category in one of the four specialties, a registered nurse may, subject to conditions or restrictions imposed on his or her licence, perform the following:

(a) in accordance with the standards and competencies, diagnose and treat common medical disorders;

(b) in accordance with the standards and competencies, order, perform, receive and/or interpret reports of screening and diagnostic tests in the following areas:

(i) microbiology;

(ii) cytology;

(iii) biochemistry;

(iv) immunology;

(v) haematology;

(vi) forms of non contrast radiographic energy except MRI; and

(vii) virology.

(c) in accordance with the standards and competencies, and in accordance with federal legislation, prescribe and/or dispense:

(i) drugs listed in schedules I, II and III of *The Drug Schedules Regulations, 1997*, as amended from time to time;

(ii) drugs in the Health Canada Non-Insured Health Benefits list, as amended from time to time;

(iii) drugs and Natural Health Products that may be sold without a prescription;

(d) in accordance with the standards and competencies, perform minor surgical and invasive procedures in the following areas:

- (i) suturing;
- (ii) irrigation;
- (iii) incision and drainage;
- (iv) excisions;
- (v) intubation; and
- (vi) insertion.

(4) In the course of engaging in the practice of registered nursing in the nurse practitioner category in one of the four specialties, the member shall meet the nurse practitioner standards and competencies.

(5) To obtain initial licensing in the nurse practitioner category in one of the four specialties, a registered nurse must:

- (a) be a member in good standing;
- (b) be currently licensed as a registered nurse;
- (c) have satisfactorily completed:
  - (i) a nurse practitioner category registered nursing program in one of the four specialties, or
- (d) have satisfactorily completed a demonstration of nurse practitioner competencies in one of the four specialties; and

(6) In addition to subsections (5) and (7) a person who last practised registered nursing outside Saskatchewan in an advanced practice role that is recognized by council to be equivalent to the nurse practitioner category in one of the four specialties in Saskatchewan must, to obtain initial licensing in the nurse practitioner category in one of the four specialties, produce evidence establishing to the satisfaction of council that the person was in good standing as a nurse practitioner in one of the four specialties in the jurisdiction where the nurse last practised registered nursing. The applicant must provide evidence of registration in the jurisdiction where and when the person last practised as a registered

nurse (nurse practitioner) indicating whether or not the applicant is the subject of an investigation or any practice limitations, restrictions or conditions in that jurisdiction.

(7) To maintain eligibility for registration in the nurse practitioner category in one of the four specialties, a registered nurse must:

(a) work in nursing practitioner activities approved by the association in one of the four specialties for at least nine hundred hours in the three years immediately preceding the application; and

(b) hold a membership in the nurse practitioner category in one of the four specialties with the association or a regulatory body recognized by the association while working in approved nurse practitioner activities in that specialty for these hours to contribute to eligibility for registration.

(8) A registered nurse with a licence in the nurse practitioner category in one of the four specialties who practices less than 900 hours in the nurse practitioner category in that specialty in the preceding three years must:

(a) satisfactorily complete additional nurse practitioner education courses or learning activities to address the standards and competencies required of a nurse practitioner in that specialty; and

(b) provide references as required by the association.

(9) To register for the subsequent year in the nurse practitioner category a person must:

(a) maintain eligibility for registration as set out in section 3(7) or section 3(8); and

(b) complete the prescribed inventory and renewal form and submit it with the annual registration fee in the manner prescribed by council, to the registrar by November 1st.

(10) On application and where council considers it appropriate, the council may waive the requirements of section 3(7)(a).

(11) A licence to practice registered nursing as a nurse practitioner may be issued to a person who meets the requirements of section 3(9).

(12) Council may place conditions or restrictions on a licence in the nurse practitioner category taking into account the need to protect the public, the particular circumstances of

the registered nurse and the context of practice including client population, type of care, service delivery model and/or staffing.

(13) Only a registered nurse licensed to practise in the nurse practitioner category shall, while practising as a nurse practitioner:

(a) follow her/his name with RN(NP) and an indicator of one of the four specialties on the licence;

(b) when wearing identification for professional reasons, follow her/his name with RN(NP) and an indicator of one of the four specialties on the licence.

#### SECTION 4. THE PRESCRIPTION REVIEW PROGRAM.

(1) The association shall participate in the Prescription Review Program established in Saskatchewan.

(2) Panel of Monitored Drugs – The Prescription Review Program shall apply to all dosage forms of the following drugs, except where indicated otherwise:

ACETAMINOPHEN WITH CODEINE - in all dosage forms except those containing 8 mg or less of codeine

ACETYLSALICYLIC ACID (ASA) WITH CODEINE - in all dosage forms except those containing 8 mg or less of codeine

AMPHETAMINES - in all dosage forms

ANABOLIC STEROIDS

ANILERIDINE - in all dosage forms

BARBITUATES

BENZODIAZEPINES – in all dosages and forms

BUPRENORPHINE – in all dosages and forms

BUTALBITAL - in all dosage forms

BUTALBITAL WITH CODEINE - in all dosage forms

BUTORPHANOL

CHLORAL HYDRATE

COCAINE - in all dosage forms

CODEINE - as the single active ingredient, or in combination with other active ingredients, in all dosage forms except those containing 20 mg per 30 ml or less of codeine in liquid for oral administration

DIETHYLPROPION - in all dosage forms

FENTANYL - in all dosage forms

GABAPENTIN

HYDROCODONE - DIHYDROCODEINONE - in all dosage forms

HYDROMORPHONE - DIPHYDROMORPHONE - in all dosage forms  
LEVORPHANOL - in all dosage forms  
MEPERIDINE - PETHIDINE - in all dosage forms  
METHADONE - in all dosage forms  
METHYLPHENIDATE - in all dosage forms  
MORPHINE - in all dosage forms  
NORMETHANDONE-P-HYDROXYEPHEDRINE - in all dosage forms  
OXYCODONE - as the single active ingredient or in combination with other active ingredients in all dosage forms  
OXYMORPHONE  
PANTOPON - in all dosage forms  
PENTAZOCINE - in all dosage forms  
PHENTERMINE - in all dosage forms  
PROPOXYPHENE - in all dosage forms

(3) Prescriptions for drugs covered by the Prescription Review Program shall be issued by a RN(NP) according to the policies and procedures agreed to by the College of Dental Surgeons of Saskatchewan, the College of Physicians and Surgeons of Saskatchewan, the Saskatchewan Registered Nurses' Association and the Saskatchewan College of Pharmacists.

(4) In order to prescribe a drug to which the Prescription Review Program applies, a RN(NP) shall complete a written prescription which meets federal and provincial legal requirements and includes the following:

- (a) the patient's date of birth;
- (b) the patient's address;
- (c) the total quantity of medication prescribed, both numerically and in written form;
- (d) the patient's health services number; and,
- (e) the prescriber's name and address.

(5) For the purpose of this bylaw, "written prescription" includes an electronic prescription that meets the requirements for electronic prescribing under the Pharmaceutical Information Program.

(6) A RN(NP) who prescribes a drug to which the Prescription Review Program applies, and who provides the prescription directly to a pharmacy by electronic prescribing, by email or by FAX, or who transmits a prescription in accordance with the policies and protocols of the Pharmaceutical Information Program, need not include both the quantity numerically and in written form.

(7) RN(NP)s shall only prescribe part-fills of medications to which the Prescription Review Program applies if the following information is specified in the prescription:

- (a) the total quantity;
- (b) the amount to be dispensed each time; and
- (c) the time interval between fills.

(8) The office of the Registrar may gather and analyze information pertaining to the prescribing of medications to which the Prescription Review Program applies in Saskatchewan for the purpose of limiting the inappropriate prescribing and inappropriate use of such drugs. In order to fulfill that role, the office of the Registrar may, among other activities:

- (a) generally, provide education to RN(NP)s in order to encourage appropriate prescribing practices by RN(NP)s;
- (b) alert RN(NP)s to possible inappropriate use of medications to which the Prescription Review Program applies by patients to whom they have prescribed such drugs;
- (c) alert RN(NP)s to possible inappropriate prescribing of medications to which the Prescription Review Program applies;
- (d) make recommendations to a RN(NP) with respect to that member's prescribing of medications to which the Prescription Review Program applies;
- (e) require a RN(NP) to provide explanations of his or her prescribing of medications to which the Prescription Review Program applies. In making requests for an explanation, the office of the Registrar may require the member to provide information about the patient, the reasons for prescribing to the patient, and any knowledge which the member may have about other narcotics or controlled drugs received by the patient;
- (f) cause information, concerns or opinions of general application to the

profession to be communicated to the RN(NP)s without identifying the particular member to whom such information relates;

(g) provide information gathered in connection with the Prescription Review Program to another health professional regulatory body including the College of Dental Surgeons of Saskatchewan, the Saskatchewan College of Pharmacists or the College of Physicians and Surgeons of Saskatchewan, provided the information gathered is required by that body to perform and carry out the duties of that health professional regulatory body pursuant to an Act with respect to regulating the profession. Where the personal health information relates to a member of the health professional body seeking disclosure, disclosure by the office of the Registrar of that information may only be made in accordance with *The Health Information Protection Act*, and in particular section 27(5) of that Act.

(9) A RN(NP) shall respond to such requests for explanation, as described in paragraph (8)(e) above, from the office of the Registrar within 14 days of receipt of such a request for information.

(10) The office of the Registrar may extend the deadline for reply at his or her discretion, upon receipt of a written request for extension from the member.

(11) A RN(NP) who receives such a request for information shall comply, to the best of his or her ability, fully and accurately with such requests for information.

(12) The association may enter into an agreement with a person or organization to do any or all of the following:

(a) access and analyze information in the prescription review database pertaining to RN(NP) prescribing;

(b) advise the SRNA of concerns pertaining to RN(NP) prescribing;

(c) advise the SRNA of possible inappropriate use of medications to which the Prescription Review Program applies by patients to whom RN(NP)s have prescribed such medications;

(d) provide general education to RN(NP)s pertaining to prescribing of Prescription Review Program medications; and

(e) alert the SRNA to possible inappropriate use of medications to which the Prescription Review Program applies by patients to whom a RN(NP) has prescribed such medications.

(13) Failure to comply with paragraphs (8)(e), (9) and (11) above is professional misconduct pursuant to section 26 (2)(m) of *The Registered Nurses Act, 1988*.

## BYLAW VII - FEES

### SECTION 1. APPLICATION FEE FOR THE GENERAL PRACTICE CATEGORY.

- (1) A non-refundable application fee shall accompany an application for initial registration from an applicant who:
  - (a) has completed a nursing program in Canada or who has been a registered nurse in another Canadian jurisdiction; or
  - (b) has completed a nursing program in a country other than Canada and who has not been a registered nurse in another Canadian jurisdiction.
- (2) A non-refundable application fee shall accompany an application for additional authorized practice.
- (3) The fee shall be determined by the council from time to time on a cost recovery basis.

### SECTION 2. APPLICATION FEE FOR THE NURSE PRACTITIONER CATEGORY.

- (1) A non-refundable application fee shall accompany an application for initial registration in the nurse practitioner category, in accordance with Bylaw VI, Section 3, subsection 6(e), on a cost recovery basis.

### SECTION 3. INITIAL REGISTRATION FEE.

- (1) The initial fee for registration as a practicing member shall be equal to the annual registration fee except where the applicant meets the requirements of section 3(2).
- (2) An applicant who is currently a member of the Canadian Nurses Association through registration in another province shall pay an initial registration fee equivalent to the annual registration fee minus the Canadian Nurses Association fee.
- (3) There shall be no additional initial registration fee for the Nurse Practitioner category or for the registered nurse with additional authorized practice.

#### SECTION 4. ANNUAL REGISTRATION FEE.

- (1) December 01 of the previous year to November 30 of the current year shall be defined as the registration year.
- (2) The annual registration fee for the period December 01 to November 30, for practicing members shall be the amount approved from time to time by the council and the members at an annual or special meeting in compliance with Section 14 and 15 of *The Registered Nurses Act, 1988*.
- (3) A member of the association who has not paid the annual registration fee on or before November 30, shall cease to be a practicing member. An applicant shall be registered as a practicing member upon completing the prescribed application and renewal form and submitting it with the annual registration fee to the registrar provided that the applicant has met the requirements of Bylaw V, section 3(1) and 3(3).
- (4) The registration fee shall be pro-rated at 60% of the annual registration fee for those who obtain a licence to practice nursing for the period June 01 to November 30 and 40% of the annual registration fee for those who obtain a licence to practice nursing for the period September 01 to November 30.
- (5) An applicant who is currently a member of the Canadian Nurses Association through registration in another province, shall pay an annual registration fee equivalent to the annual registration fee minus the Canadian Nurses Association fee.
- (6) There shall be no additional annual registration fee for the registered nurse with additional authorized practice.

#### SECTION 5. GRADUATE NURSE REGISTRATION FEE.

- (1) The fee for a four month temporary licence to practice nursing as a graduate nurse shall be one-third of the annual registration fee.

SECTION 6. NON-PRACTICING MEMBERSHIP FEE.

- (1) The initial fee for registration as a non-practicing member shall be equal to the annual fee for a non-practicing member.
- (2) The annual fee for non-practicing members shall be the amount approved from time to time by the council and the members at an annual or special meeting in compliance with Section 14 and 15 of *The Registered Nurses Act, 1988*.

SECTION 7. STUDENT MEMBERSHIP FEE.

- (1) The annual fee for student membership shall be the amount approved from time to time by the council and members at an annual or special meeting in compliance with Section 14 and 15 of *The Registered Nurses Act, 1988*.

SECTION 8. RETIRED MEMBERSHIP FEE.

- (1) The initial fee for registration as a retired member shall be equal to the annual fee for a retired member.
- (2) The annual fee for retired members shall be the amount approved from time to time by the council and the members at an annual or special meeting in compliance with Section 14 and 15 of *The Registered Nurses Act, 1988*.

SECTION 9. LIFE MEMBERSHIP AND HONORARY MEMBERSHIP FEE.

- (1) Life membership and honorary membership is an award granted by the association and there shall be no annual registration fee.

SECTION 10. EMERGENCY PRACTICING MEMBERSHIP FEE.

- (1) There shall be no annual registration fee for the emergency practising membership category.

## BYLAW VIII - EXAMINATIONS

### SECTION 1. REGISTERED NURSE EXAMINATIONS.

- (1) As of January 1, 2015, to be eligible for registration and the issuance of a licence to practice registered nursing in the general practice category, a person must write and pass the National Council Licensure Exam for Registered Nurses (NCLEX®-RN).
- (2) Until December 31, 2014, to be eligible for registration and the issuance of a licence to practice registered nursing in the general practice category, a person must write and pass the Canadian Registered Nurse Examination.
- (3) A person who fails the Canadian Registered Nurse Examination and/or the National Council Licensure Exam for Registered Nurses (NCLEX®-RN) a total of three times is no longer eligible to write the applicable examination until that person satisfactorily completes an approved or recognized basic registered nursing education program.
- (4) In exceptional circumstances an applicant may apply to the Registrar to have an examination writing annulled.

### SECTION 2. REGISTERED NURSE (NURSE PRACTITIONER) EXAMINATIONS.

- (1) To be eligible for registration and the issuance of a licence to practice registered nursing in the nurse practitioner category, a person must write and pass the examination required for the particular nurse practitioner specialty, which exams are:
  - (a) National Certification Corporation (NCC): Neonatal Nurse Practitioner Certification Examination;
  - (b) Canadian Nurse Practitioner Exam: Family/All Ages (CNPE : F/AA);
  - (c) American Academy of Nurse Practitioners Certification Program (AANPCP) – Adult – Gerontology Primary Care Nurse Practitioner Examination (A-GNP); and
  - (d) Pediatric Nursing Certification Board (PNCB) – Certified Pediatric Nurse Practitioner – Primary Care (PNCB PNP) Examination.

(2) A person who fails an examination required by subsection (1) on the third attempt, is no longer eligible to write that examination until the person satisfactorily completes an approved or recognized RN(NP) nursing education program.

## BYLAW IX - COUNCIL AND STATUTORY COMMITTEES

### SECTION 1. COUNCIL COMMITTEES.

- (1) A council committee is any committee created by these Bylaws or the Act or by council.
- (2) Each council committee with the exception of a statutory committee shall:
  - (a) perform its duties subject to direction of the council;
  - (b) meet as frequently as required to fulfill its terms of reference; and
  - (c) report to the council on the business of the council committee.
- (3) The council shall make all council committee appointments with the exception of the elected members of the Nominations Committee and shall specify an alternate who may be called upon to complete the term of any committee member who resigns during her/his term of office. If the alternate is called upon to complete the term of a committee member that term shall not be considered as a term of the alternate.
- (4) Policies shall be maintained to guide the council in appointing the registered nurse members of council committees.
- (5) Where membership on a council committee includes a public representative, unless otherwise specified, the public representative shall be selected by the council from a list of nominees preferably submitted by voluntary organizations named by the council.
- (6) Unless the chairperson is elected or named in the bylaws, the council shall appoint the chairperson.
- (7) Each council committee appointment shall be for a term as specified in the council policies.
- (8) Each member of a council committee shall have voting power, unless otherwise specified.
- (9) A quorum for a council committee shall be the majority of its members.
- (10) No staff member shall have voting privileges on a council committee.

## SECTION 2. LEGISLATION AND BYLAWS COMMITTEE.

- (1) The membership of the legislation and bylaws committee shall be:
  - (a) the president-elect who shall be the chairperson;
  - (b) three registered nurses, one of whom shall be a former council member, all of whom shall be appointed by council and broadly representative of a wide range of practice; and
  - (c) one of the current public representatives from council.
- (2) The duties of this committee shall be:
  - (a) to identify options for council consideration regarding potential changes to legislation affecting nursing;
  - (b) to identify options for council consideration regarding potential changes to *The Registered Nurses Act, 1988*; and
  - (c) upon direction from the council, to draft revisions for *The Registered Nurses Act, 1988* and bylaws.

## SECTION 3. NOMINATIONS COMMITTEE.

- (1) The membership of the nominations committee shall be:
  - (a) two registered nurses elected by ballot for a two-year term on a staggered basis;
  - (b) one registered nurse with previous council experience and one public representative with previous board experience, both of whom shall be appointed by council for a two-year term.
- (2) The duties of this committee shall be to prepare:
  - (a) a slate of candidates to fill the registered nurse positions on council;
  - (b) a slate of candidates to fill positions on this committee.

#### SECTION 4. STATUTORY COMMITTEES.

(1) The Investigation Committee and Discipline Committee are statutory committees and they receive their powers from *The Registered Nurses Act, 1988*.

#### SECTION 5. INVESTIGATION COMMITTEE.

(1) The committee shall notify, in writing, the member who is the subject of a report or allegation that a report or allegation has been received and ask for a written response prior to the committee's report being submitted to the discipline committee.

(2) The committee shall notify, in writing, the person who made the report or allegation that the report will be reviewed.

(3) The committee shall take appropriate action including:

(a) request any person to answer any questions and to produce any records, notes, photographs, x-rays, films, books, papers or other documents or things in the person's possession or under their control that are or may be relevant to the report or conduct being investigated; and

(b) with the consent of the person producing them, copy and keep copies of any of the documents or things that are produced under clause (a).

(4) The committee shall hold in confidence, all documentation and information received.

(5) Where a notice of hearing has been served upon a nurse and she/he or legal counsel for the nurse signifies the intention to plead guilty, the investigation committee may approve an agreed statement of facts and documents establishing the factual basis of the allegations.

(6) The investigation committee may make a recommendation on the appropriate disposition, however the discipline committee is not bound by such recommendations.

(7) If at the conclusion of its investigation, the committee finds there is insufficient evidence to refer a matter to discipline but the investigation tends to show undesirable practice, the investigation committee may issue a letter(s) of guidance for the purpose of giving confidential feedback including suggestions in order to improve nursing practice.

- (8) If, at the conclusion of its investigation, the investigation committee determines there is sufficient evidence of professional misconduct and/or professional incompetence, it may consider, in an appropriate case, resolving the matter by using a consensual complaint resolution agreement.
- (9) Such an agreement may only be used with the consent of the investigation committee and the nurse who is the subject of the investigation alleging the professional misconduct and/or professional incompetence.
- (10) In determining whether to use a consensual complaint resolution agreement, the investigation committee shall consider the best interests of the public, the complainant, the profession of nursing and the nurse who is the subject of the complaint.
- (11) The purpose of a consensual complaint resolution agreement is to find an acceptable solution and remedy for the professional misconduct and/or professional incompetence disclosed in the course of the investigation in order to promote safe and competent nursing practice.

#### SECTION 6. DISCIPLINE COMMITTEE.

- (1) Where the investigation committee recommends that the discipline committee hear and determine a complaint, the council shall establish the discipline committee consisting of five persons, a majority of whom shall be registered nurses, to hear the complaint.
- (2) Council shall designate the chair of the discipline committee.
- (3) The committee shall hold all hearings in Regina unless otherwise directed by the executive director.
- (4) The person(s) who made the complaint pursuant to subsection 28 (1) of the Act:
  - (a) shall be advised by the executive director of the date, time and place of the hearing;
  - (b) is entitled to attend the hearing.
- (5) The discipline hearing shall be open to the public.
- (6) The discipline committee may exclude any members of the public and the complainant from any part of the hearing, when the committee is of the opinion that the evidence brought in the presence of the persons to be excluded will unduly violate the privacy of a person other than the members whose conduct is the subject of the hearing.

(7) When evidence led involves the confidential health records of clients, numbers or letters may be assigned to replace names.

(8) Where the committee determines that the person is not guilty of professional incompetence or professional misconduct, written notice that the complaint has been dismissed shall be provided to:

- (a) the person who was the subject of the report;
- (b) the person who made the report; and
- (c) the public.

## **BYLAW X - STAFF ADVISORY COMMITTEES**

### **SECTION 1. STAFF ADVISORY COMMITTEES.**

- (1) A staff advisory committee focuses on products that contribute to the Ends established by council.
- (2) The authority for staff advisory committees comes from the executive director; however, these committees may have a reporting, approval or appeal mechanism relationship with council.
- (3) Staff advisory committees are established by an impartial selection process.
- (4) Staff advisory committees shall include, but not be limited to, the nursing education program approval committee and the registration and membership committee.

## **BYLAW XI - SPECIAL COMMITTEES**

### **SECTION 1. SPECIAL COMMITTEES.**

- (1) Special committees may be appointed by the council at any time to carry out the objectives of the association and may be dissolved by a resolution of the council.
- (2) Unless established by bylaw, the council shall establish for all special committees:
  - (a) terms of reference;
  - (b) membership and term of appointment;
  - (c) chairperson;
  - (d) budget allocation.

## **BYLAW XII - AD HOC COMMITTEES**

### SECTION 1. AD HOC COMMITTEES.

- (1) Ad hoc committees may be appointed by the council for a specific purpose on precise terms of reference which state that the committee shall cease to function upon completion of the specific task.
- (2) The council shall establish for all ad hoc committees:
  - (a) terms of reference;
  - (b) membership and term of appointment;
  - (c) chairperson;
  - (d) budget allocation.

## **BYLAW XIII - REIMBURSEMENT OF EXPENSES**

### SECTION 1. COUNCIL AND COMMITTEES.

- (1) Travel, honoraria and other expenses of elected members of the council and all committee members of the association, who are attending meetings or travelling on association business, shall be paid from general funds according to the policies of the association.

### SECTION 2. OTHER.

- (1) Under special circumstances the council shall have authority to approve payment of travel and other expenses for non-members who are on association business.

## **BYLAW XIV - CODE OF ETHICS OF THE ASSOCIATION**

### SECTION 1. CODE OF ETHICS OF THE ASSOCIATION

- (1) The association adopts the June 2008 Canadian Nurses Association *Code of Ethics for Registered Nurses*.

**BYLAW XV- STANDARDS, COMPETENCIES AND NURSING EDUCATION  
PROGRAM APPROVAL**

SECTION 1. STANDARDS, COMPETENCIES AND NURSING EDUCATION PROGRAM APPROVAL

- (1) Effective December 1, 2013, the association adopts the standards and competencies contained in its May 1, 2013 publication entitled *Standards and Foundation Competencies for the Practice of Registered Nurses* as the standards and competencies required by and for registered nurses pursuant to the relevant Bylaws.
- (2) The association adopts the standards and competencies contained in its January 1, 2011 publication entitled *Registered Nurse (Nurse Practitioner) RN(NP) Standards and Core Competencies* as the standards and competencies required by and for registered nurses (nurse practitioners) pursuant to the relevant Bylaws.
- (3) The association adopts the standards and competencies contained in its October 2003 publication entitled *Clinical Expectations for RN(NP)s* as the standards and competencies required by and for registered nurses (nurse practitioners) pursuant to the relevant Bylaws.
- (4) For the purposes of approval of the registered nursing education programs pursuant to section 19 of *The Registered Nurses Act, 1988*, the association adopts its June 2015 *Program Approval for Established RN Education Programs*.
- (5) For the purposes of approval of the registered nursing education programs pursuant to section 19 of *The Registered Nurses Act, 1988*, the association adopts its September 2015 *Program Approval for New and Dissolving RN or RN Re-Entry Education Programs*.
- (6) For the purposes of subsection 24(3) of *The Registered Nurses Act, 1988*, the association adopts its February 2011 publication entitled *Nursing Education Program Approval Process – Administrative Document for Approval of Nursing Education Programs for Registered Nurse (Nurse Practitioner)s*.
- (7) For the purposes of subsection 24(3) of *The Registered Nurses Act, 1988*, the association adopts its July 2013 publication entitled *Nursing Education Program Approval Process Administrative Document for the Registered Nurse with Additional Authorized Practice Courses*.

## SECTION 2. DELEGATION FROM A PHYSICIAN TO A REGISTERED NURSE.

(1) A registered nurse may practise outside the scope of registered nursing as defined in the Act and in the *Standards and Foundation Competencies for the Practice of Registered Nurses*, if a duly qualified medical practitioner has delegated the authority for the registered nurse to perform the activity pursuant to the bylaws of the College of Physicians and Surgeons of Saskatchewan.

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