



College of Registered Psychiatric Nurses of British Columbia

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College of Registered Psychiatric Nurses of British Columbia

Annual Report 2008-2009

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Report from the Chair, CRPNBC Board of Directors

This past year has seen incredible activity for the College of Registered Psychiatric Nurses of British Columbia. There are several key initiatives that the College has been involved in this past year and will continue in 2009/2010.

The CRPNBC has had a continued emphasis and focus on the pursuit of new opportunities and challenges that best position the organization, individual Registered Psychiatric Nurses and the profession of psychiatric nursing to meet the evolving challenges in an ever-changing, dynamic health care environment. As a regulatory body governing Registered Psychiatric Nurses in British Columbia, the CRPNBC continues to be accountable for the protection of the public through provision of excellence in mental health/psychiatric nursing for the patient/client populations entrusted to our care.

Legislative revisions to the bylaws and regulations that govern the practice of psychiatric nursing are under review. The review will position the CRPNBC and Registered Psychiatric Nurses to address the changing scope of practice and to expand traditional roles and responsibilities within

legislation consistent with the enhanced scope of practice. Work on the scope of practice and the regulations that govern the practice of Registered Psychiatric Nurses has continued over the past year.

CRPNBC has also been participating with the three other regulatory bodies for Registered Psychiatric Nurses in the development of advanced practice roles for Registered Psychiatric Nurses.

2008/2009 marked a memorable and unparalleled year in the history of changes that occurred in the professional staffing complements of the CRPNBC. Mary MacInnes retired from the position of Deputy Registrar/Practice Consultant. This resulted in the Human Resource Committee posting the position and the successful recruitment of Linda Syssoloff into the position. In September 2008, Donna Higenbottam, Executive Director/Registrar also resigned. The Human Resource Committee was again put into action and successfully recruited Dr. Jacquolynne Keath into the position vacated by Donna. These changes herald the end of one era and the beginning of another era in the history of the CRPNBC. We went into these changes with a strong and united organization and a strong and forward-thinking Board of Directors.

2009/2010 continues to be a busy year for the CRPNBC Human Resources Committee under the Chair of Paul Anderson, a public member of the CRPNBC Board of Directors. Recruitment activity necessitated a review of the terms and conditions of employment for the CRPNBC non-contract staff; a review and updating of the CRPNBC Human Resource Policies; an updating of the contract template used by the CRPNBC to hire casual staff and/or purchase services and the recommendation to implement performance

management tools for use at the CRPNBC – one for non-contract staff and one for the unionized staff. At its January 2009 meeting, the Board of Directors assigned the Human Resource Committee the task to review staffing levels with an eye to the possible recruitment of an additional practice consultant.

The CRPNBC continues to advance and to advocate for key leadership roles in the areas of administration, education, clinical practice and research. We continue to expand our horizons and our networks, not only at the provincial and national levels but also at the international level. We continue to engage with provincial and federal governments, with the Mental Health Commission of Canada, with the Office of Nursing Policy in Ottawa, with international nursing organizations and with the Canadian Institute on Patient Safety in matters affecting the profession of psychiatric nursing, mental health service delivery, patient/client and staff safety, families and Registered Psychiatric Nurses.

Educational programs that are available to Registered Psychiatric Nurses continue to expand and diversify to meet the competing demands of the workforce and the demand for quality mental health services. For the first time in the educational history of Registered Psychiatric Nurses in British Columbia there is now not one, but two options to pursue degrees in the field of psychiatric nursing. There are some who would never have believed that this could be realized. There are those of us who believed it would become a reality.

In the Fall of 2008, the CRPNBC Board of Directors established an Executive Committee to oversee the business of the College between meetings of the Board of Directors and to address any urgent or emergent issues that might arise that required immediate attention. The Executive Committee has been busy

since its inception and has already proven its value in making recommendations for action to the Board of Directors.

The opportunities to share knowledge, transfer and exchange knowledge, build integral nursing networks, to meet and discuss best practices, evidence-based practices and to integrate administration, education, clinical practice and research appear limitless in the global age in which we work and live. I look forward to continuing to work with psychiatric nursing colleagues in Canada and other parts of the international nursing community. It is some of the most exciting times for the CRPNBC and for Registered Psychiatric Nurses with the only boundaries being those that we might self-impose.

In conclusion of this report, I would like to take the opportunity to publicly acknowledge, thank and commend the Board of Directors, the CRPNBC Executive Director/Registrar, the CRPNBC Deputy Registrar/Practice Consultant and the CRPNBC administrative support staff for their tireless leadership, continued commitment and dedication in supporting the many initiatives that have been undertaken. It is these people who are the critical components to ensure that the mandate of the CRPNBC in the protection of the public is upheld and that there is accountability back to the public for the mental health services and programs for which we are entrusted.

– Dorothy Jennings, RPN 

Board of Directors:

Paul Anderson
Anna Helewka
Dorothy Jennings
Judith Macrae
Lis Pedersen
Michele Robson
Rosanne Rothenberg
Ross Stewart



Report from the Executive Director / Registrar

The College of Registered Psychiatric Nurses of British Columbia (CRPNBC) is the regulatory body for registered psychiatric nurses, and licensed graduate psychiatric nurses in British Columbia. CRPNBC receives its authority from the Government of BC through the *Health Professions Act* (HPA). The *Health Professions Act* empowers CRPNBC to superintend the practice of nurses in the public interest and to govern registrants according to the *Act*, and the Bylaws of the College. Some exciting and challenging times lie ahead with the recent changes to the HPA.

The mission of the College is to serve and protect the public. The College is responsible through self regulation to assure a safe, accountable and ethical level of psychiatric nursing practice. This mission guides the objects of the College, which are outlined below:

- a. to superintend the practice of the profession;
- b. to govern its registrants according to this *Act*, the regulations and the bylaws of the College;
- c. to establish the conditions or requirements for registration of a person as a member of the College;
- d. to establish, monitor and enforce

standards of practice to enhance the quality of practice and reduce incompetent, impaired or unethical practice amongst registrants;

- e. to establish and maintain a continuing competency program to promote high practice standards amongst registrants;
- f. to establish, for a College designated under section 12(2)(h), a patient relations program to seek to prevent professional misconduct of a sexual nature;
- g. to establish, monitor and enforce standards of professional ethics amongst registrants;
- h. to require registrants to provide to an individual access to the individual's health care records in appropriate circumstances;
- i. to inform individuals of their rights under this *Act* and the *Freedom of Information and Protection of Privacy Act*, (i.1) to establish and employ registration, inquiry and discipline procedures that are transparent, objective, impartial and fair;
- j. to administer the affairs of the College and perform its duties and exercise its powers under this *Act* or other enactments;
- k. in the course of performing its duties and exercising its powers under this *Act* or other enactments, to promote and enhance the following:
 - (i) collaborative relations with other colleges established under this *Act*, regional health boards designated under the *Health Authorities Act* and other entities in the provincial health system, post-secondary education institutions and the government;
 - (ii) interprofessional collaborative practice between its registrants and persons practicing another health profession;
 - (iii) the ability of its registrants to respond and adapt to changes in practice environments,

advances in technology and other emerging issues.

Internationally Educated Nurses – National Nursing Assessment Service

Over the past nine months that I have been the registrar for CRPNBC many interesting opportunities have transpired for RPNs from a local to national presence. Representing Registered Psychiatric Nurses as a member of the National Nursing Assessment Service Management Committee has been quite exciting. Recently we hired a program manager to oversee phase one of a special project which will look at the possibility of harmonizing the assessment process for Internationally Educated Nurses wishing to work in Canada for the three nursing professions; Registered Psychiatric Nurses, Registered Nurses and Licensed Practical Nurses. This first part of the project involves collecting data from 25 regulatory bodies in the country and listing the gaps and similarities. Phase 2 will look at analyzing the data and setting up a model for this harmonization through a national service.

Bridging Program

Alberta and BC were awarded a special project to develop and implement a bridging course for UK nurses who need to upgrade their general medicine schooling in order to meet our Canadian Standard. This program is being offered in the UK with the idea that nurses upgrade their deficiencies before coming to Canada.

Agreement on Internal Trade

Although the Agreement on Internal Trade doesn't directly assist us crossing borders east of Manitoba it is helping to pave this road for RPNs. In Western Canada the four provinces are excited about the prospect of Yukon having its own regulatory body for Registered Psychiatric Nurses – a project that is in process with the government of Yukon at this time.

National Registration Examination

Our national examination was revised in May with a new version to be launched in June 2009. Our office is now equipped with a new scanning system which helps streamline our examination process. The registration committee is fully operational now, meeting every month and has had many tasks to deal with and done so expediently. One task was streamlining the registration examination process so dates are known well in advance and published on the website for IENs who may wish to come to Canada. Our huge database upgrade is currently in process and we hope to begin online registration through a three year phase-in project starting with this next renewal year.

Registered Psychiatric Nurses of Canada Executive Director Resource Group

The Executive Directors, Registrars, Deputy Registrars and Practice Consultants of the four western provinces meet face to face three times a year. One of the projects that RPNC is currently working on is a proposal for an environmental scan to determine what type of advanced roles in psychiatric nursing would best service our consumers. This year we are combining our regular meeting with meetings in Ottawa in October and continue work on joint projects and policy development.

Continuing Competency Program

Our Quality Assurance committee has one task this year which is to develop and start the implementation of a continuing competence program. The booklet which was due for release has been put on hold until the new revised Standards of Practice come out later this year. In the meantime details of the activities for membership auditing were at the display booth at Education Day, May 29, 2009, and will be available in the *Communicator* and on the website: www.crpnb.ca.

Scope of Practice and Bylaw update

Our bylaws have been approved by the Board of Directors of CRPNBC at the March 26 board meeting. They will soon be out for government submission for review. In addition the Scope of Practice task group will meet in June to finalize their submission to the government for consideration.

Collaboration with CRNBC, CLPNBC

The three nursing bodies of BC have recently met to collaborate on the role and definition of student nurse supervision. A task group has been struck involving all three regulatory bodies. Further details will be published in the *Communicator*. John Collins has agreed to be the staff representative for CRPNBC on this very important committee.

Registered Psychiatric Nurses of Canada World Congress 2010 for Psychiatric Nurses

As many of you know World Congress for Psychiatric Nurses in 2010 is being hosted by BC. There are many ways to get involved. If you are interested in joining any of the committees you can let our office staff know or go to the website at www.worldcongress.ca for more information. Mark March 18-20, 2010 in your calendars for this event of Building Global Connections in Psychiatric Nursing.

These past nine months have gone by quickly and exciting times for RPNs lie ahead. Once a third professional staff member has been hired more practice consulting activities will start up involving regular visits to worksites. I will continue my involvement with the Provincial and well as National initiatives on behalf of all Registered Psychiatric Nurses.

– Dr. Jacquollyne Keath,
RPN, RN, CPMHN(C), MA, PhD
Executive Director/Registrar 📧

Report from the Inquiry Committee

First and foremost, I would like to thank the Committee members, inspectors and staff for the work they have done to make this Committee work.

Since the last Annual General Meeting seven cases have been received by the Registrar.

Significant legislative changes will directly and significantly impact the way the Inquiry Committee carries out its mandate.

On November 1, 2008, new sections of the British Columbia *Health Professions Act* came into force including Section 39.3 which requires notification to the public of certain actions taken by the Inquiry Committee. To comply with these new requirements, the Inquiry Committee is in the process of revising its deliberation process to provide procedural fairness to respondents and complainants, to develop policy to guide when publication should occur, and develop a process for drafting adequate reasons for publication.

On October 17, 2008, the Health Professions General Regulation was passed under the *Health Professions Act*. Section 7 of the regulations sets a 120 day period from the date a registrar receives a complaint to the date which the complaint is to be disposed. Non-compliance may result in the suspension of the Inquiry Committee's jurisdiction over the matter in favour of the Health Professions Review Board.

On March 16, 2009 Sections 50.54 to 50.65 of the *Health Professions Act* were brought into force establishing the right of review to the Health Professions Review Board of certain registration decisions, Inquiry Committee disposition decisions and delayed Inquiry Committee investigations.

These changes require more time and resources from the College. One of the areas that needs resources is

the investigation of complaints. This is a skilled and time consuming activity which has to be done within a tight time frame. In order to ensure compliance with the mandate, training is being set up for the inspectors. Good inspectors are critical to the running of an effective Inquiry Committee.

Summary of Complaints

March 1, 2008 to February 28, 2009

1. Complaint from colleague regarding unprofessional conduct – Complaint investigated, resigned from profession.
2. Complaint from employer regarding boundary issues – signed an Agreement.
3. Complaint from colleague – Investigated and dismissed, no action taken.
4. Complaint from employer regarding professional practices – Investigated and dismissed, no action taken.
5. Complaint from colleagues regarding management and professional skills – Investigated and remains in progress.
6. Complaint from employer regarding professional practices – Investigated and dismissed, no action taken.
7. Complaint from employer regarding management and professional practices – signed an Agreement.

– Richard Meyer 📧

Committee members:

Richard Meyer, Chair
Linda Syssoloff, Staff
Dorothy Jennings
Gerry Nelson
Judith Macrae
Karen Godin
Mary MacInnes
Rom Petri
Jody Al Molky

Report from the Quality Assurance Committee

The Quality Assurance (QA) committee has been meeting monthly in the past year. The committee has made good progress towards the establishment of a Continuing Competency Practice Review (CCPR) process as part of the CRPNBC Quality Assurance program as per the requirements of the *Health Professions Act* (HPA). In keeping with the philosophy of ensuring registrants have input to the CCPR process, registrants were asked to complete a survey related to continuing competency, and in addition, members of the CRPNBC Workplace Representative Committee were asked to review and comment on a draft competency review booklet developed by the committee, thereby providing the committee with valuable data to be used in the development and implementation of the CCPR program.

The committee has welcomed new members Nina Krack, Andrea Langevin, Sandi Mitchell and Gamini Randeni, who have been instrumental in bringing critical insights and perspectives from various practice contexts to the development of the CCPR process. John Collins has also been hired as a part-time practice consultant specifically to assist this committee with the implementation of the CCPR program.

In reviewing the Continuing Competency Reviews programs of other regulatory colleges in Canada (psychiatric nursing as well as other disciplines) it became clear that the CCPR documents and process must be user friendly for all involved (registrants and regulatory college staff) and that the implementation of such a program must proceed incrementally and will involve two phases. In Phase 1 randomly selected registrants fill out a mandatory form (in checklist

format) that asks questions about what the registrants have done to maintain and/or enhance competency. Registrants will submit the form only – no supporting documents will be required for this phase. The committee has developed a booklet that outlines the process for a Continuing Competency Practice Review; included in this booklet will be the new updated CRPNBC Standards of Practice, a Question and Answer section and various sample learning plans. The implementation of Phase 1 will occur with the 2010 renewal period.

The committee continues to implement communication strategies aimed at informing registrants of the CCPR process. Anna Helewka and Grant Warrington have written articles for the *Communicator*, information has been placed on the CRPNBC web site and the QA committee had a table at the CRPNBC Education Day 2009 including a poster presentation and a question and answer sheet with sample learning plans. Prizes were awarded to those successful in completing this task.

Along with further work on setting up the structure and process for the implementation phase, the committee's next task will be to develop criteria for evaluating submitted continuing competency reviews and learning plans. Parallel to this work will be the selection and training of practice reviewers who will evaluate the documents submitted by registrants.

– Anna Helewka, Chair

Report from the Patient Relations and Professional Practice Committee

The report from the Patient Relations and Professional Practice Committee highlights the major initiatives and activities undertaken in 2008/2009 and those that will be undertaken going forward in 2009/2010.

Professional Practice Concerns

Professional practice concerns continue to be received from diverse settings including psychiatric units in general hospitals, community mental health centres, adolescent units, small rural communities, emergency mental health services and intermediate and residential care facilities.

Issues raised by Registered Psychiatric Nurses include: risks to client/patient safety; mental health and addiction clients; admissions to acute care hospitals and patient/client increased acuity levels and rising numbers in community mental health referrals and case loads.

Other professional practice concerns include: shortage of nurses and inadequate staffing complements; increased staff sick time and stress leaves; unsafe work environments resulting from increased violence in both hospital and community mental health practice settings; the utilization of Licensed Practice Nurses in acute mental health settings where patient/client populations are not stable; family and consumer concerns related to a lack of advocacy services and reduced services and electronic medication systems.

Labour Mobility

An inter-provincial Labour Mobility Working Group, comprised of the four regulatory Psychiatric Nursing bodies in Alberta, British Columbia, Manitoba and Saskatchewan continues to actively address the

issues of labour mobility for Registered Psychiatric Nurses.

A recent advance in the pursuit of labour mobility for Registered Psychiatric Nurses is that a regulation in psychiatric nursing has been prepared by the Yukon government and is currently under review. The Labour Mobility Working Group is following up on the Yukon legislation, exploring the regulatory structures of other northern regions and how these structures might be formalized; identifying strategic contacts and resources and looking at opportunities for agreements with other provinces that have shown an interest in discussions of this nature. There is continued liaison with the provincial labour mobility coordinators as key contacts to explore further opportunities for labour mobility in other jurisdictions in Canada.

In January 2009 a 2009/2010 Labour Mobility Strategic Plan was developed with two goals: establish regulatory mechanisms or agreement letters to ensure that Registered Psychiatric Nurses are able to continue to work in Northern Canada and support the establishment of regulatory mechanisms for Registered Psychiatric Nurses in Eastern Canada.

Professional Practice Guidelines

The Patient Relations and Professional Practice Committee has completed three professional practice guidelines over the past year. These include *Guidelines for a High Quality Practice Environment for Registered Psychiatric Nurses*, a *Position Statement on the Use of Physical Restraint and Seclusion as Psychiatric Nursing Interventions* and *Guidelines for Registered Psychiatric Nurses in Independent Practice*. These documents have been posted on the CRPNBC website.

The preparation of a position statement on The Registered Psychiatric Nurses Role in Family

and Consumer Advocacy has been identified as a new initiative for 2009.

Document Reviews

A review of the CRPNBC Standards of Practice and Code of Ethics, Colleagues Demonstrating Substance Abuse/Chemical Dependency and the Competency Profile for the Profession of Psychiatric Nursing are being undertaken in 2009. These documents have not recently been reviewed and were determined to be three reviews that should be addressed as priorities.

Patient/Client Safety in Mental Health Practice Settings

The CRPNBC continues to engage with, and be active in initiatives related to the work of the Canadian Institute on Patient Safety in matters affecting the profession of psychiatric nursing, mental health service delivery and patient/client and staff safety.

Workplace Representative Program

The CRPNBC Workplace Representative Program falls under the auspices of the Patient Relations and Professional Practice Committee. The Program utilizes Registered Psychiatric Nurses in diverse practice settings throughout British Columbia to act as CRPNBC authorized workplace representatives to identify and address professional practice concerns and issues in the settings in which they are employed and in the communities in which they live.

There are approximately 26 CRPNBC workplace representatives who come from practice settings that include, but that are not exclusive of the community, acute general hospitals, forensic services, correctional services, tertiary facilities, educational facilities, regional treatment centres, mental health teams, adolescent psychiatry, geriatrics and independent practice. Workplace representatives are in all

of the Health Authorities throughout British Columbia and represent urban, rural and remote areas where Registered Psychiatric Nurses are employed.

Significant professional practice issues have been identified in many workplace settings in both general hospital in-patient psychiatric units and community mental health settings. The CRPNBC continues to work with the workplace representatives, Registered Psychiatric Nurses impacted by the issues and with senior management to resolve outstanding issues, address professional practice concerns and improve practice settings for Registered Psychiatric Nurses. Key themes related to concerns and issues expressed include nursing shortages, security in the workplace, drug induced psychosis, increased acuity levels of clients/patients, labour mobility, increased caseloads in the community and patient/client safety issues.

Workplace representatives look to increase communication opportunities with each other and with their respective memberships through the use of the CRPNBC website, practice networks, meetings, work place bulletin boards and articles in the CRPNBC's *Communicator* Newsletter.

Acknowledgements

In conclusion of this report, I would like to take the opportunity to publicly acknowledge, thank and commend the members of the Patient Relations and Professional Practice Committee, the Workplace Representatives, the CRPNBC Executive Director/Registrar and her administrative and professional staff for their continued commitment and dedication in supporting the many initiatives that are undertaken. It is these people who are the critical elements to ensure that professional practice concerns and issues are addressed,

that there is accountability back to the public for the mental health services and programs with which we are entrusted and that ethical levels of psychiatric nursing practice are maintained.

– *Dorothy Jennings*
Chair, CRPNBC Patient Relations and Professional Practice Committee ☒

Report from the Webmaster

The Internet presence of the CRPNBC continues to grow around the world. The website is frequently lauded for its user friendliness and its great content. I work hard to keep the website up to date so the information contained within its pages is contemporary and useful to members and others.

Employers of RPNs find our website a great place to advertise employment opportunities because the ads are exposed to thousands of RPNs around the world and they usually get results. They are even willing to pay for the privilege which helps to underwrite the cost of producing and maintaining the CRPNBC website.

With the World Congress for Psychiatric Nursing fast approaching in March of 2010 my workload has expanded exponentially. A new website has been constructed (www.worldcongress.ca) and everyone is invited to visit the website and let us know what they think. I tried to make the site representative of our beautiful province and the city of Vancouver where the Congress is being hosted. The call for abstracts for the Congress has been issued and abstracts can be submitted via the CRPNBC website, the UPNBC website, RPN website or the World Congress website.

– *Stewart Johnson* ☒



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AUDITORS' REPORT

To the Members of
College of Registered Psychiatric Nurses of British Columbia

We have audited the statement of financial position of **College of Registered Psychiatric Nurses of British Columbia** as at **28 February 2009** and the statements of operations, changes in net assets and cash flows for the year then ended. These financial statements are the responsibility of the College's management. Our responsibility is to express an opinion on these financial statements based on our audit.

We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we plan and perform an audit to obtain reasonable assurance whether the financial statements are free of material misstatement. An audit includes examining, on a test basis, evidence supporting amounts and disclosures in the financial statements. An audit also includes assessing the accounting principles used and significant estimates made by management, as well as evaluating the overall financial statement presentation.

In our opinion, these financial statements present fairly, in all material respects, the financial position of the College as at 28 February 2009 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

CULVER & CO.

Chartered Accountants
Vancouver, Canada
25 May 2009



College of Registered Psychiatric Nurses of British Columbia

Statement of Financial Position

28 February 2009

	2009	2008
Assets		
Current assets		
Cash		
Unrestricted	\$ 210,224	\$ 202,290
Restricted [note 6]	8,653	8,484
Members' dues receivable	72,524	63,289
Accrued interest receivable	14,667	11,901
Prepaid expenses	11,765	37,463
	317,833	323,427
Investments [note 3], market value \$2,035,377; 2008 – \$1,956,259	2,033,924	1,954,147
Property and equipment [note 4]	378,909	408,945
	\$ 2,730,666	\$ 2,686,519
Liabilities and Net Assets		
Current liabilities		
Accounts payable and accruals	\$ 50,313	\$ 22,738
Deferred revenue	682,013	658,745
	732,326	681,483
Net assets		
Unrestricted	1,351,184	1,328,013
Invested in property and equipment	378,909	408,945
Internally restricted [note 5]	259,594	259,594
Externally restricted [note 6]	8,653	8,484
	1,998,340	2,005,036
	\$ 2,730,666	\$ 2,686,519

Approved by the Executive Board:

_____ Director

_____ Director



College of Registered Psychiatric Nurses of British Columbia

Statement of Changes in Net Assets
Year ended 28 February 2009

	Unrestricted	Invested in capital assets	Internally restricted	Externally restricted	Total 2009	Total 2008
	\$	\$	\$	\$	\$	\$
Balance, beginning of year	1,328,013	408,945	259,594	8,484	2,005,036	1,794,059
Excess of revenue over expenditures	(6,865)	–	–	–	(6,865)	210,704
Amortization	38,925	(38,925)	–	–	–	–
Purchase of equipment	(8,889)	8,889	–	–	–	–
Transfer to internally restricted funds [note 5]	–	–	–	–	–	–
Earned on externally restricted funds [note 6]	–	–	–	169	169	273
	1,351,184	378,909	259,594	8,653	1,998,340	2,005,036



College of Registered Psychiatric Nurses of British Columbia

Statement of Operations
Year ended 28 February 2009

	2009	2008
Revenue		
Members' dues and registration	\$ 745,557	\$ 787,918
Investment income	57,542	44,874
Miscellaneous	61,090	47,483
Registration, examination and evaluation fees	37,869	36,921
	317,833	323,427
	\$ 902,058	\$ 917,196
Expenditure [Schedule]		
Operating	662,489	533,500
Governance function	115,084	99,156
Member relations	72,890	24,391
Complaints and discipline	35,907	16,445
Registration	17,311	20,973
Patient relations	5,242	16,635
	908,923	711,100
Excess (deficiency) of revenue over expenditure before the following	(6,865)	206,096
Gain on sale of investments	—	4,608
Excess (deficiency) of revenue over expenditure	\$ (6,865)	\$ 210,704



College of Registered Psychiatric Nurses of British Columbia

Statement of Cash Flows
Year ended 28 February 2009

	2009	2008
Cash provided by (used in):		
Operations:		
Excess (deficiency) of revenue over expenditure	\$ (6,865)	\$ 206,096
Add amortization, which does not involve cash	38,925	29,305
	\$ 32,060	\$ 235,401
Changes in non-cash working capital		
Members' dues receivable	(9,235)	(615)
Accrued interest and other receivables	(2,766)	47,919
Prepaid expenses	25,698	(24,321)
Accounts payable and accruals	27,575	(6,433)
Deferred revenue	23,268	6175
	96,600	252,568
Investing:		
Change in investments	(79,777)	(244,836)
Purchase of equipment	(8,889)	(41,842)
	(88,666)	(286,678)
Financing:		
Endowment interest received	169	273
Increase (decrease) in cash position	8,103	(33,837)
Cash, beginning of year	210,774	244,611
Cash, end of year	\$ 218,877	\$ 210,774
Cash comprises		
Unrestricted cash	\$ 210,224	\$ 202,290
Restricted cash	8,653	8,484
	\$ 218,877	\$ 210,774



College of Registered Psychiatric Nurses of British Columbia

Schedule of Expenses
Year ended 28 February 2009

	2009	2008
Operating		
Salaries and employee benefits	\$ 426,519	\$ 330,189
Payout – D. Higgenbottam	15,328	–
Payout – M. MacInnes	8,358	–
Office stationery, supplies and expense	39,533	39,016
Computer consulting	38,642	21,789
Amortization	38,925	29,305
Telephone and postage	31,484	39,271
Building operating costs	21,788	23,203
Audit and accounting	13,375	8,250
Car allowance, travel and public relations	10,589	15,952
Bank charges	9,133	12,439
Insurance	3,725	4,118
Legal	2,445	1,737
Public relations	2,120	7,202
Staff development	525	1,029
	\$ 662,489	\$ 533,500
Governance function		
Board and executive committee meetings	\$ 38,242	\$ 21,049
News publications	28,514	18,966
External committees	25,971	40,125
Group liability insurance	17,053	12,570
Quality assurance	5,304	6,446
	\$ 115,084	\$ 99,156
Member relations		
World Congress expenses	\$ 45,040	\$ –
Workshop and seminar costs	11,650	2,300
Annual general meeting	10,200	19,591
Student awards	6,000	2,500
	\$ 72,890	\$ 24,391
Complaints and discipline		
Transportation and accommodation	\$ 17,762	\$ 12,606
Investigations	17,918	3,404
Seminars and educational materials	227	435
	\$ 35,907	\$ 16,445

College of Registered Psychiatric Nurses of British Columbia

Schedule of Expenses, continued
Year ended 28 February 2009

	2009	2008
Registration		
Salary replacement	\$ 1,817	\$ 11,567
Meeting and invigilator costs	12,025	5,918
Project expenses	3,469	3,488
	\$ 17,311	\$ 20,973
Patient relations		
Salary replacement	\$ 4,702	\$ 13,806
Resource materials	540	2,829
	\$ 5,242	\$ 16,635



1. General:

The College is the regulatory body for the profession of psychiatric nursing in British Columbia. The College is incorporated under the *Health Professions Act* and is responsible, through self-regulation, to assure a safe, accountable and ethical level of psychiatric nursing practice. It is accountable to the public through government regulation. The College is responsible for establishing standards of education and qualifications for registration.

The College is exempt from income tax under the provisions of paragraph 149(1)(k) of the *Income Tax Act*.

2. Significant accounting policies:

(a) Change in accounting policies

Effective 1 March 2008, the College adopted the accounting standard for Capital disclosures – Section 1535 issued by the Canadian Institute of Chartered Accountants. This standard requires disclosure of information about an entity's capital and how it is managed, as well as the disclosure of any externally-imposed capital requirements, whether the entity has complied with them, and the consequences of any non-compliance.

Effective 1 March 2008, the College adopted the accounting standard for General Standards of Financial Statement Presentation - Section 1400 issued by the Canadian Institute of Chartered Accountants. This standard requires management to make an assessment of an entity's ability to continue as a going concern. The adoption of this standard had no effect on the College's financial statements.

(b) Use of estimates

The preparation of financial statements in accordance with Canadian generally accepted accounting principles requires that management make estimates and assumptions that impact the reported amounts of assets and liabilities and the disclosure of contingent assets and liabilities at the date of the financial statements and the recognized amounts of revenues and expenses during the reporting period. Actual amounts may differ from these estimates.

(c) Property and equipment

Property and equipment are recorded at cost. Amortization is provided over the estimated useful life on the straight-line basis over the following terms (one-half the normal rate is used in the year of acquisition):

Building	20 years
Office furniture and equipment	10 years
Computer equipment	3 years
Computer software	1 year

(d) Deferred revenue

Members' dues are recognized in the fiscal year for which they are due. Dues billed and collected in advance are recorded as deferred revenue and will be recognized as revenue in the following year.

Members' dues covering the period from 1 March 2009 to 28 February 2010 were due from members by 28 February 2009.

(e) Revenue recognition

Revenue from members' dues is recognized as revenue over the membership period to which they relate. Other contributions are recognized as revenue when received or receivable if the amount can be reasonably estimated and collection reasonably assured.

(f) Financial instruments

The College has designated all of its financial instruments as "held to maturity" which means they are measured and reported at amortized cost. The carrying value of cash, receivables, investments, payables and accruals and deferred revenue approximate their fair values due to the short term nature of these assets and liabilities, or capacity of prompt liquidation. The College did not enter into any derivative financial arrangements for hedging or speculative purposes.

3. Investments:

Investments are carried at the lower of cost or market value (where any impairment in value is not deemed temporary). The College maintains an investment policy intended to achieve preservation and growth of capital and generation of income. Investments are limited to government or government backed investments, and Canadian banks, trust companies and major corporations. No investments shall be made in derivatives or in real estate. All investments are highly liquid and easily converted to cash.

4. Furniture and equipment:

	Cost	Accumulated Amortization	2009 Net	2008 Net
	\$	\$	\$	\$
Land	150,300	–	150,300	150,300
Building	260,928	58,708	202,220	215,266
Office furniture and equipment	149,126	139,341	9,785	25,141
Computer equipment	40,459	23,855	16,604	18,238
	600,813	221,904	378,909	408,945

5. Internally restricted investments

The College has internally restricted a portion of its investments for possible future legal and building expenses. Each year, 5% and 10% of the annual excess of revenue over expenditures is allocated to the legal and building funds respectively. No allocation was made in 2009 as there was a net operating loss. The cumulative balances of such restricted funds is as follows:

	2009	2008
Legal fund	\$ 176,531	\$ 176,531
Building fund	83,063	83,063
	<u>\$ 259,594</u>	<u>\$ 259,594</u>

6. Externally restricted cash

The College received funds to establish a memorial award in honour of the late Martin Ramslic, RPN. The principal amount and investment income earned is externally restricted for the payment of annual awards. Investment income earned during the year was \$169 [2008 – \$273]. To date, the College has not paid out an award.

7. Management of capital

The College manages its capital to enable it to continue as a going concern and to meet the stated purposes of the Organization. The College considers its capital to consist of its net assets and this is managed by making adjustments in light of economic conditions and the risk characteristics of the underlying assets. The College does not have any debt and is not subject to externally imposed capital requirements.

8. Commitments

The College leases office equipment under agreements which provide for annual payments of approximately \$3,800. Management anticipates the College will commit to the current or future lease agreements in similar amounts for the next five years.

College of Registered Psychiatric Nurses of British Columbia



Helping People Achieve Their Personal Best



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Mission

The mission of the College of Registered Psychiatric Nurses of British Columbia is to serve and protect the public. The CRPNBC is responsible through self-regulation to assure a safe, accountable and ethical level of psychiatric nursing practice.

It is accountable to the public through government regulation.