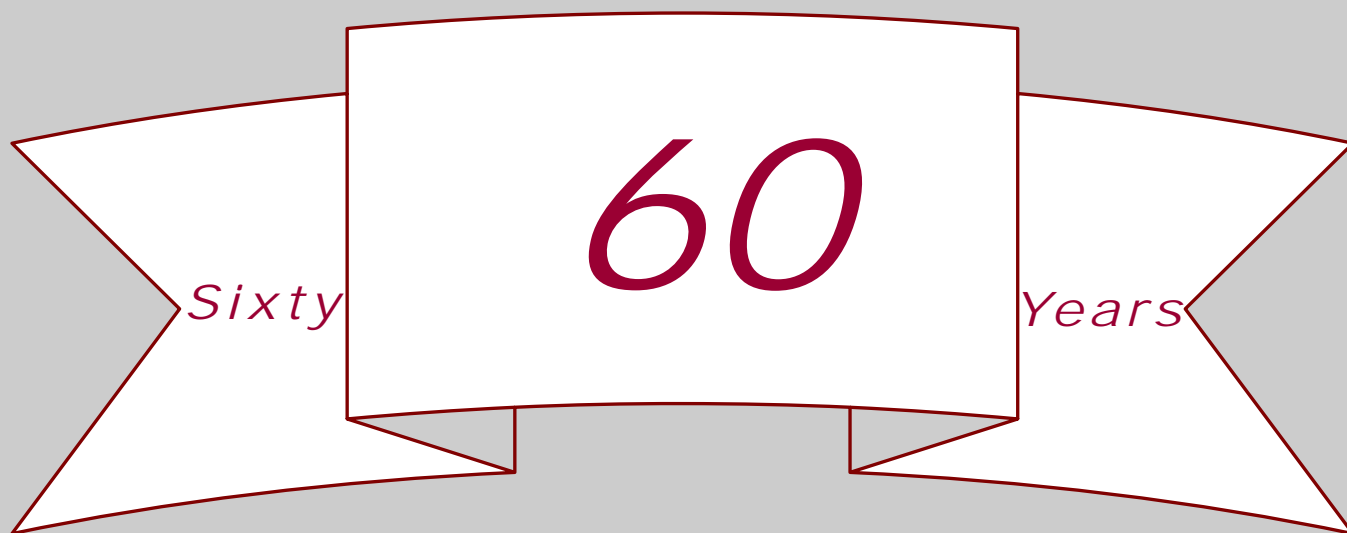


Registered Psychiatric Nurses
Association of Saskatchewan

2007-2008

Annual Report

Celebrating



Years

Of Seeing People Through

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Statement of Purpose of Annual Meeting

In June 1984, the RPNAS Council passed a statement focusing the purposes of the Annual Meeting. These purposes are:

1. To provide a forum for the dissemination of information from Council to the membership;
2. To provide a vehicle for the membership to give guidance to Council through adoption of resolutions/motions; and
3. To afford an opportunity for members to raise issues of concern through an “Open Forum.”

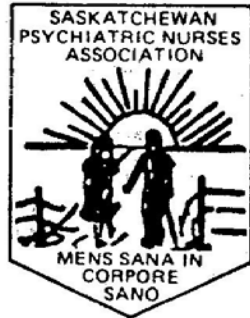
The agenda for the Annual Meeting has been prepared following legislated requirements and these purposes. The call for submissions of new business via the Open Forum was published in the Fall/Winter 2006 issue of the *RPN News*. The guidelines for the Open Forum allow for questions and new business arising from the floor. Time limits for discussion will be at the discretion of the Chair.

Please remember to bring your 2008 RPN License!

Bylaw III - Meetings of the Association Section 4 - Voting
Eligibility to vote at a meeting of the association shall be determined by presentation of a current practicing membership card.

The 2008 Annual Meeting and Education Day

RPN's - Our History, Our Future



REGISTERED
PSYCHIATRIC
NURSES
ASSOCIATION OF
SASKATCHEWAN

Seeing People Through

June 13, 2008

Radisson Hotel

405 20th St. E. Saskatoon, SK

306-665-3322

AGENDA

Education Day

- 9:00 am Registration
9:30 Welcome and Introduction of Guests
9:45 Guest Speaker - Beverley Hicks - From Barnyards to Bedside to Books and Beyond
The Evolution and Professionalization of Psychiatric Nursing
10:30 Break
10:45 Guest Speakers - Sue Myers, Linda Rabyj, Helen Timm
The Psychiatric Nursing Program

12:00 pm President's Awards Luncheon

Annual Meeting

- 2:00 Welcome and Introductions
Review of Procedures and Rules of Order
Questions on Reports contained in Annual Report
Review of Licensing Fees
Open Forum Discussions
Installation of 2008-2009 RPNAS Council
3:45 Presidential Address
4:00 Closing and Adjournment

Rules of Order for Annual Meetings of the Registered Psychiatric Nurses Association of Saskatchewan

The President, or in his/her absence or at his/her request, a Chairperson shall preside over the Annual Meeting.

SUBJECT OF DISCUSSION

No question of a sectarian character shall be discussed at meetings.

RECOGNITION

When a member wishes to speak, he/she shall be recognized by the Chairperson, and shall give his/her name and the branch he/she represents, and shall confine his/her remarks to the question at issue.

CONDUCT OF MEETING PARTICIPANTS

A member shall not interrupt another except it be to call a point of order.

If a member is called to order, he/she shall at the request of the Chairperson, take his/her seat until the question of order has been decided.

Should a member persist in unparliamentary conduct, the Chairperson will be compelled to name him/her and submit his/her conduct to the judgment of the meeting. In such cases the member whose conduct is in question should explain and then withdraw, and the meeting will determine what course to pursue in the matter.

MOTIONS

All motions arising from the floor shall be written in duplicate and signed by the mover and seconder before being presented. Discussion will not commence until this process is complete.

DEBATE

Members who wish to speak to a question or make a motion shall use the microphone, address the Chairperson and give their name and position.

No member may speak more than once to the same question unless all others who wish to speak have done so. If the mover of the motion speaks a second time, debate shall be closed.

Time for debate may be extended by a two-thirds (2/3) vote of the members.

When a motion to Close Debate is made, no discussion or amendment of either motion is permitted. If the majority vote that the “questions now put” the original motion has to be put without debate. If the motion to put the question is defeated, discussion will continue of the original motion.

CALLING THE QUESTION

When a question is put, the Chairperson, after announcing the question, asks “Are you ready for the question?” If no member wishes to speak, the question will be put.

Questions may be decided by a show of hands, or a standing vote, but a roll call vote may be demanded by 30 per cent of the members present. In a roll call vote, each member shall be entitled to one vote.

A call for a vote on the question (“Call to Question”) requires a formal motion and approval by two-thirds (2/3) vote of the members.

APPEAL

The member may appeal the decision of the Chairperson. The Chairperson shall then put the question thus “Shall the decision of the Chair be sustained?” The question shall not be debatable, except that the Chairperson may make an explanation of his/her decision.

RECONSIDERATION OF A MOTION

A motion may be reconsidered provided that the mover of the motion to reconsider voted with the majority, and notice of motion is given for consideration at the next meeting, and said notice of motion is supported by two-thirds (2/3) of the members qualified to vote.

AUTHORITY

In all matters not regulated by these rules of order, Robert’s Rules of Order shall govern.

OBSERVERS

Observers may, at the call of the Chairperson, be invited to comment or ask questions on a particular issue once discussion by membership has been completed.

CLARIFICATION REGARDING ABSTENTIONS

The basic rule is that a motion requiring a majority vote is adopted if more members vote in favour of the motion than vote in opposition. Members who are entitled to vote but who abstain are not counted when determining a majority. In effect, they have relinquished their right to be a factor in the decision. (It is possible for example, to have 30 members in attendance at a meeting and when the votes are counted discover that there are seven votes in favour and five opposed. The motion would be adopted because a majority of those voting were in favour of the motion.)

RPNAS Council 2007-2008

President: Karl Mack, RPN, Regina

President-Elect: Mary K, Renwick, RPN, Swift Current

Members-at-Large:

Cheryl Carlson, RPN, Regina

Tracy Claassen, RPN, Saskatoon

Donald Froese, RPN, Saskatoon

Janet Kulyk, RPN, Prince Albert

Lois Mokolki, RPN, Prince Albert

Marion Palidwor, RPN, North Battleford

Tamara Quine, RPN, Regina

Public Representative:

Margaret Lynch, Regina

RPNAS Staff

Executive Director: Robert Allen, RPN

Registrar: Candace Alston, RPN

Office Manager: Shayna Coward

Administrative Assistant: Carla Needham



President's Report

It has been an exciting time for the RPNAS and Registered Psychiatric Nurses in our Province. Since 2001 the RPNAS has had a total of 23 new registrations from students who graduated in the province of Saskatchewan. Of those new registrations, 5 were students who had graduated from the old Psychiatric Nursing program, 6 were students who graduated with a diploma from NEPS and 12 were students who have graduated with a NEPS degree. In 2001 we had a total membership of 1038 active members and as of April 2008 we have 885. In this period of time we gained 23 new members from Saskatchewan education programs and 54 who were graduates from other jurisdictions and we lost 153 members.

Of those 18 new members who graduated from NEPS we now have 7 that are still registered with our association and 6 others who are eligible for registration. As of 2011 we could potentially have 30 new members as a result of the new Psychiatric Nursing education program in Saskatchewan. The importance of new registrations with our association is obvious. Through the work of many, we once again have a Psychiatric Nursing education program in this province that will undoubtedly be responsible for educating new members of our association to the highest standards. We are celebrating Psychiatric Nursing education not only because it casts new hope on the sustainability of our profession but, more importantly, we are educating a group of people who will be committed to working with people who tend to be unfairly marginalized by our society and those who live with a stigma that is reported by them to be worse than the mental health challenge/illness itself.



Research and reports completed at the provincial and federal levels have consistently indicated that there is a shortage of staff trained in the field of mental health. Currently in our province we are seeing bed closures related to a shortage of Psychiatric Nurses and in some cases people with mental health challenges/illness are being admitted to facilities with staff that have little to no training providing services. Where else, other than mental health programs, would this be ok? The RPNAS is not Ok with this approach to services. We will continue to challenge these directions and work to ensure that those people who are consumers of mental health services in our province get care and services from staff members who are trained and whose regulatory body has competencies that clearly indicate a skill level in the field of mental health/psychiatric nursing.

Over the past year members of council, with the assistance of Bob Allen and Candace Alston, have been meeting with some of our provincial branches to discuss some issues that are important to our association. Council wanted to get feedback from as many members as possible on issues that include; the association's strategic plan, proposed psychiatric nurse/nurse practitioner role, world congress, mobility issues, and the new psychiatric nursing education program. In some of the branches we had a good turnout of members and some excellent ideas were discussed. On behalf of our council I would like to thank all those members who made an effort of come out and meet with us. Council's ability to make decisions that are representative of our members' thoughts is dependent on our membership's involvement. The intention of traveling out to each of the various branch locations was based on a need to arouse our membership's interest in the RPNAS and create some excitement about the future of our association and some of the current issues facing PRNs, not only at the provincial level but the national level as well. Our Executive Director, Bob Allen, is professionally connected to Boards and Committees at both the provincial and national levels and this gives us a heightened awareness of the current trends and issues. We really do need to re-build our association

through creating an influx of new members who are proud and excited about our profession and continue to seek way to re-ignite the passion of existing members.

During the month of March 2008 we also had the opportunity to meet with the new minister of health Mr. Don McMorris. Our discussion with the Minister included our position that Registered Psychiatric Nursing is a distinct and autonomous profession in the province of Saskatchewan and that we are one of three professional regulatory bodies representing three groups of nurses. We discussed the condition of some mental health facilities in the province and the need for some improvements in the quality of the care and work environments. Other agenda items included the memorandum of agreement between the Saskatchewan Union of Nurses and the Minister of Health regarding the recruitment of nurses for Saskatchewan, some proposed changes to the Hospital Regulations Act, and our proposal to create a Psychiatric Nurse/Nurse Practitioner role in our province. We have plans to meet with the Minister of Education in the near future and with the appropriate stakeholders.

During the month of April I had the opportunity to attend the first day of the Saskatchewan Union of Nurses annual general meeting in Prince Albert. As a nurse who is not a member of a Union this was a new experience for me. I have to say that I was impressed with the solidarity amongst the nurses. I was further impressed with the process when the President of the Saskatchewan Union Nurses made a statement to the crowd regarding the fact that the Union represents both Registered Nurses and Registered Psychiatric Nurses. Rosalee Longmore went on to say that the recent memorandum of agreement between the Saskatchewan Union of Nurses and the Ministry of Health was intended for both Registered Nurses and Registered Psychiatric Nurses. I want to thank Ms. Longmore for her clarification and indicate how important it is to our members that this sort of recognition occurs.

There is no shortage of work for nurses. It really doesn't matter if one is a Licensed Practical Nurse, a Registered Nurse or a Registered Psychiatric Nurse there is no shortage of work to be done and it is when we lose sight of our clients needs that we get caught up in jurisdictional agendas that get in the way of effective collaboration. As long as there is tension progress is compromised. We need to have a collective voice on issues related to patient care and best practice. Conflict and fighting at the grass roots level serves as a function to keep people away from the real cause of the problem. It is like the functioning of a family where there is a lot of conflict amongst the children because of ineffective parenting. People tend to focus on the behavior of the children as opposed to addressing the real cause of the problem. As part of our strategic plan we are focusing on what we as RPNs do and what our competencies are. We are letting the various stakeholders know what we can do and how we can assist in the process of providing safe and competent psychiatric nursing care to the people of Saskatchewan. There is clearly a shortage of us. Psychiatric Nurses are not only trained to work with people who are mentally ill. We are trained to work with people who have a wide range of physical illnesses; we are trained in addictions, family intervention, gerontology, developmental disabilities, forensic nursing, health promotion and prevention at the primary, secondary and tertiary levels. Personally I have gone in my own life to obtain education at the bachelors, masters and doctoral levels and the best education I ever received was through the two year diploma program in psychiatric nursing at Wascana Institute right here in Saskatchewan. We must not let elitism push the nursing profession toward a professional strata system that results in a professional class system that is characterized by tension as opposed to respect.

RPNs tend to work with patients, clients, residence, or consumers who are often thought of as undesirable. We work with multiple complex diagnoses and we do so in some of the most run down facilities in the province. In the past year I visited one mental health facility where there was a co-ed

unit that had no partition between the toilets in the only bathroom on the ward. The staff I spoke with talked about the high incidents of staff injuries and staff calling in sick. These problems were mainly attributed to the severity of behavioral problems being presented by the client group. Let me tell you, if I had to live in an environment like that one where these problems are taking place, I would be displaying some significant behavioral problems as well. Our physical and social surroundings are still important to our sense of esteem and wellness. Placing someone in a substandard physical space will result in substandard social behavior. If any other medical service was required to provide services to their consumers in such an environment there would be a huge outcry but because they are people with mental health issues somehow this sort of arrangement is acceptable. It is not acceptable and we need to let this be known.

My first year as President of the RPNAS has been a wonderful experience. I want to thank the RPNAS and its members for the opportunity. We have a terrific group of staff at the association and their work on our behalf should not go unrecognized. I am looking forward to the next year and then Mary K Renwick will take over as President and from what I can tell Mary K will provide excellent leadership. I look forward to the next year and if you have any question or concerns please do not hesitate to give me a call.

Respectfully Submitted
Dr. Karl Mack, RPN, BSW, MS. EdD. (RSW. Sask.)

Executive Director's Report



Once again I am pleased to provide an annual report for the Registered Psychiatric Nurses Association of Saskatchewan. A year goes far too quickly and the changes around us are constant. As an established organization with a well established mandate, we know what is required of us in our efforts to achieve our ends. Hard work, sacrifice, volunteerism and putting the needs of others ahead of our own are hallmarks of our membership. However, these actions can take a personal toll and are increasingly rare in our modern competitive and complex society. Thank you to all of our volunteers for your work this past year.

As we approach another Annual General Meeting there are many good news items to report on and an increased feeling of hope that the care and treatment of those suffering from mental illness will benefit from the new developments in this area of health care.

Registered Psychiatric Nurses are the nursing profession with the highest percentage of members reaching retirement age. Many members that planned on retiring have renewed their license and are finding new and rewarding post retirement challenges. However, our numbers are in decline annually and it will be 2011 when the first class graduates from the new program. This presents an ongoing challenge to us in terms of resources, but of more concern is the decreasing availability of access to qualified care for members of the public. The RPNAS continues to work with the NEPS to have their graduates qualify for registration with our association.

We continue to appreciate the strong support shown for our profession by government, other health professions and associations and the public. We have a long proud history of service to the people of Saskatchewan, and are working hard to ensure that continues.

It has been a very busy year at the national level again, with a focus on the goal of including mental health

in Primary Health Care. I have been actively involved in the CAMIMH (Canadian Alliance for Mental Illness and Mental Health), the CCMHI (Canadian Collaborative Mental Health Initiative) and an active participant in the RPNC (Registered Psychiatric Nurses of Canada).

The RPNC World Congress for Psychiatric Nurses is fast approaching. Be sure to register as it is filling up quickly. You can register online at www.rpnc.ca or www.rpnas.com

The following review of our progress toward the established ends of our association is provided:

E1

The vision of the RPNAS is: The distinct profession of Psychiatric Nursing will involve Saskatchewan people in utilizing diverse strategies, within an integrated healthcare system, resulting in mental health and wellness.

1. RPNAS is a member of the Mental Health Coalition in Saskatchewan, and as such continues to collaborate and contribute to the activities. The focus is on advocacy and the promotion of improvements in the delivery of care and services to those living with mental illness as well as the prevention of mental illness. Our members are active throughout the province in staff and management roles, contributing to the dialogue and developments at all levels of community.

At a national level the Executive Director sits on the management committee of the Canadian Collaborative Mental Health Initiative. www.ccmhi.ca, and is a member of CAMIMH. www.camimh.ca

2. The Executive Director attends various meetings with the other nursing associations to address concerns and keep abreast of issues which impact on the public. Our mandate of public safety is the focus of our participation.

3. The nursing sector study, www.buildingthefuture.ca. Scope of practice, staffing skill mix, recruitment and retention of RN's, RPN's and LPN's are some of the major issues being addressed. The work of this project must not be lost so we will endeavor to work toward the recommendations made.

4. We are pleased to have Margie Lynch of Regina on our Council and appreciate her valuable input on behalf of the public. Jane Whyte continues her valuable input on the Professional Conduct Committee.

5. The resolution of the educational issue with NEPS allows us to concentrate on the recruitment of new graduates to ensure that qualified professionals are available to serve the needs of the Saskatchewan public. There are NEPS graduates obtaining further credits from Brandon University so that they can qualify to write our registration examination.

6. Branch meetings around the province were attended by the Executive to receive feedback on the strategic plan and other priorities. Input from membership has been strongly encouraged.

7. Candace Alston, Registrar, represents our association in the work being done on the internationally educated nurses issues.

E2

Competent Registered Psychiatric Nurses and Graduate Psychiatric Nurses

1. Education Programs in place that ensure graduates meet beginning practitioner competencies. The NEPS continues to have a conditional approval for graduates on an individual basis. Unfortunately, few are choosing the field of mental health and it does require extra education credits at this point. This may be a disincentive for students as four years is a large commitment without the requirement of extra classes.

Only qualified candidates are permitted to write the exam.

2. RPNs have opportunities for career advancement.

2.1 Advanced education opportunities.

The lack of access to a degree in Psychiatric Nursing in Saskatchewan has meant that members must leave the province or find distance education opportunities within their chosen field. Now that a degree program is available in Saskatchewan, the educational path within Psychiatric Nursing has been somewhat addressed. Other provinces, however, have degree programs in Psychiatric Nursing.

The new diploma program will articulate to a degree in Psychiatric Nursing using distance education and other options that are increasingly available.

The RPNAS is also currently a member of a consortium of colleges and universities addressing the development of a Masters program in Psychiatric Nursing.

2.2 Mobility.

The RPNAS has an endorsement agreement with the other western provinces and is involved in processes with the Yukon, NWT and Nunavut to ensure the ability of RPNs to work in those locations.

The Registrar's office continues to work collaboratively with the other provinces to ensure consistency and thoroughness of screening and approval of reciprocal and foreign graduates. The endorsement agreement between Saskatchewan and the other western provinces has been updated and approved.

Work continues to address the mobility issue in terms of eastern Canada. Further meetings are planned to address the trade agreement issues with the stakeholders.

3. Awarding of Bursaries and Scholarships by the Association.

This continues to be an important way to further this end. Provincial government bursaries reflect confidence in our profession and the need for RPNs.

The continued collaboration at a national level through RPNC (Registered Psychiatric Nurses of Canada) furthers our goals of improved adherence to National Standards and Processes. The revised code of ethics and standards is near completion.

E3

Public Policy that promotes and supports optimal mental health

RPNAS continued to be a participant in the following;

- Saskatchewan Mental Health Coalition
- CMHA
- NIRO
- Provincial Nursing Council
- NEPS Advisory Committee
- Psychiatric Nursing Program Advisory Committee
- University of Regina Senate
- University of Saskatchewan Senate
- Registered Psychiatric Nurses of Canada
- SRNA, SALPN, RPNAS collaborative working group
- Senior Nursing Leadership Forum
- Saskatchewan Institute of Health Leadership – University of Regina
- CCMHI
- CAMIMH

The Executive has represented RPNAS at annual meetings of the other regulatory bodies as well as SUN, CMHA, SAHO and several nonprofit and not for profit organizations. Staff members are involved in charitable causes and the RPNAS has sponsored their participation in activities such as the “Run for the Cure” to support Breast Cancer Research.

RPNAS will host the World Congress in Regina in May.

E4

Psychiatric Nursing is a self regulated profession

The Continuing Professional Development process was reviewed by the Education Committee. A portfolio system was developed and information is available on the website or by contacting the Registrar.

There is currently one case under review by the Professional Conduct Committee. There were three Discipline Hearings held in the 2007-2008 year.

Public representation exists on the Disciplinary and Professional Conduct Committees, as well as on the Council.

RPNAS held two clinical conferences this past year with excellent attendance.

As a unique Profession within the Discipline of Nursing, the Registered Psychiatric Nurses Association of Saskatchewan continues to work collaboratively with the SRNA, SALPN and the Provincial Government to further the development of collaborative nursing practice.

In the interest of Patient safety and quality work environments, the individual professions have a responsibility to promote teamwork and interdisciplinary collaboration.

E5

Mental Health is a valued and integral part of the Health System

The quality of mental health services the public receives is affected by the qualifications of those delivering the services. RPNs, Psychologists and Psychiatrists are the three professionals with the preparation required to deliver adequate mental health care. RPNs are the largest group of mental health providers in western Canada.

RPNs have been the subject of ongoing intensive research by the Nursing Sector Study. Concerns about workplace conditions and safety, conditions of work and the health of nurses have resulted in an unprecedented study to help establish a nursing workforce for the future as well as address current concerns. RPNC is actively involved in many of the activities and will continue this involvement in the future.

RPNC continues to have an active voice in CAMIMH (Canadian Alliance for Mental Illness and Mental Health) to provide our voice on the issues at a National level and collaborate with other stakeholders.

There is a recognition that most professions are in need of increased education and competencies in the area of mental illness and mental health. There is a role for RPNs in the education of others as part of our professional responsibilities.

Development of concepts such as Shared Care and the inclusion of RPNs in Primary Health Teams would further the improvement of this end. Mental health clients must receive adequate and appropriate physical care. The role of the Psychiatric Nurse Practitioner is now a focus of our evolving roles and scope.

The supply of RPNs will be insufficient to meet demand. Education programs continue to be a top priority. RPNAS is very pleased with the establishment of a diploma program in Psychiatric Nursing at SIAST, which articulates to a degree.

E6

Knowledge of Mental Health, Mental Illness, Mental and Developmental Disorders

1. Destigmatization of mental illness, mental and developmental disability disorders.

1.1 Comprehension of mental health as not merely the absence of mental illness.

1.2 Human service providers have an understanding of mental health, mental illness, mental and developmental disability disorders.

If there is one area where actions can have the most effect in promoting mental health it is the destruction of the stigma surrounding mental illness. The costs and effects of stigma are being recognized as significant from an economic as well as human perspective. A more tolerant and caring society is a desire many sectors are expressing.

The RPNAS is a member of CAMIMH and involved nationally through the Registered Psychiatric Nurses of Canada in the literacy project which is doing wonderful work in research and raising awareness.

RPNAS promotes awareness and supports many organizations financially and in kind to assist toward this end.

World Mental Health Day is sponsored and celebrated from the office of RPNAS annually. The Mental Illness Awareness Week in October had a higher profile this year and continues to grow. Canada post is now a major sponsor and our hope is that other significant employers will join the cause. Increase your awareness at www.miaaw.ca

RPNAS contributes to awareness through association and partnership with other organizations and by activities such as public presentations, education sessions, research and publications.

RPNC has been active at a national level in influencing the direction and development of a national plan to address mental health and mental illness. Much remains to be done. The creation of a Mental Health Commission is a major step and we look forward to doing our share to improve the health status of the people of Saskatchewan and all Canadians.

I am committed, as the Executive Director, to continue to work collaboratively with all health organizations and governments to further the ends of our Association and improve the mental health and the health care of all the stakeholders of our Association and our owners, the public of Saskatchewan.

Respectively submitted,

Robert Allen RPN
Executive Director

REGISTRAR'S REPORT



The mandate of the Registered Psychiatric Nurses Association of Saskatchewan is to ensure people who deliver mental health services to the citizens of this province do so in a safe and competent manner. To achieve this goal our members must comply with legislation, standards of practice and registration processes. I would like to thank our members for the consistent and accurate presentation of information, provided to this office. It makes license renewal a smooth process. I would at this time like to thank Shayna once again for her commitment, and ability to make it all seem so easy. As usual, she has done a fabulous job of putting together the graphs that you will see later in this report and her work with CIHI to maintain our member's data base and accurately reflect the profession of Psychiatric Nursing in Canada.

I can hardly believe how quickly this year has passed. It only seems like yesterday that I was writing the Annual Report for 2006. A lot has happened in such a short period.

As you are well aware, the Psychiatric Nursing Program returns to SIAST in September of this year. A great deal of time here is spent consulting with Sue Myers who is the Program Head or fielding questions from prospective students. It feels good to be able to look toward the fall of 2011 to anticipate the registration of these successful students into the profession of psychiatric nursing. Interestingly, this past year has seen the largest growth in the new memberships since our last graduating class from SIAST in the 90's. Thanks to government programs offering recruitment bonuses for nurses to return to the province.

The other priority focus has been World Congress. The committees have been working tirelessly in order to provide the "best darn conference ever" in true Saskatchewan style.

I will now summarize my areas of responsibility and activities I have undertaken during the year.

Clinical Practice Consultant

In this role my responsibilities include responding to requests from members and employers for information regarding the competencies of RPNs in a variety of settings. I have also been appointed to a committee through the Regina Qu'Appelle Health Region to work along with their Practice Consultant, SRNA and SALPN to develop guidelines for Assignment/Delegation and Collaboratation within the region. This will have implications for our membership and because of this I feel that RPNAS requires representation on this committee.

Internal Committees

Education Committee

As registrar, I provide staff support to this committee. It is my responsibility to organize the CPD credit audit and follow up on any recommendations of this committee, to review scholarship and bursaries on an ongoing basis and to bring forward recommendations to Council as required.

Education Approval Committee

This committee provides guidelines for the review of all Psychiatric Nursing Programs within the province. Currently they are revising the document that outlines the process.

External Committees

Network of Inter-Provincial Regulatory Organizations

This committee meets twice a year to discuss issues common to all regulatory bodies and to participate in an educational opportunity that enhances the knowledge of the committee. Its membership consists of registrars and executive directors from the self regulated health professions and provides an opportunity to networking as well.

Mental Health Coalition

This committee, consisting of over 30 agencies from throughout the province, meets four times annually to discuss issues relevant to mental health consumers and their families. Predominantly consisting of community based service agencies and consumer advocates it exists to lobby government for positive change in their systems to support “recovery” based client care.

Internationally Educated Health Professionals Advisory Team

Throughout the year this committee, consisting of regulators, employers, unions and settlement agencies, has worked to improve access to the resources required to gain licensure in their profession for internationally educated health professionals, who are currently being underemployed within our health regions. As part of this initiative, funds were provided to SIAST to enhance their library to include learning materials that these individuals can access.

Orientation to Nursing in Canada for Internationally Educated Nurses—Program Advisory Committee—SIAST

This committee meets annually to provide a link between SIAST and the various sectors that it serves. They provide advice and guidance to assist in determining program quality, relevance and currency.

National Committees

Canadian Institute of Health Information

Our organization, along with our interprovincial colleagues, provides information from our database that is required by this group to produce their report on the status of the profession. This report is published annually and is used by the associations and government departments when engaging in work force planning.

Registered Psychiatric Nurses of Canada

This group, consisting of the Executive Directors and the association Presidents, meets annually to deal with issues of national concern. The working committees of this group are the Executive Directors Resource Group and a group consisting of the Registrars and Deputy Registrars. This group meets quarterly to work on areas of common concern, such as the reciprocity agreement, mobility issues and most recently there has been some common interest in developing a Psychiatric Nurse Practitioner designation.

World Congress Marketing Committee

The conference plans are well under way, as chairperson of the Marketing Committee I would like to thank the people who volunteered their time to be on this committee. They are Angie Craig, Carla Bolen, Karen Muller, Tamara Quine, Susan Taylor-Wood and last but not least, my predecessor, Barb Wilson.

Respectfully submitted,

Candace Alston RPN
Registrar

Membership Statistical Reports

The following pages of tables outline the statistical membership information collected this year, as well as comparisons to previous years.

Notes to Statistical Charts

Figure 1 **5 Year Comparison of Active Members**

This table compares the number of active members from 2004 to March 31, 2008. As of March 31, 2008 there were also 68 Non-Active members. It is important to note that 2004-2007 are calendar years and 2008 counts end at March 31 (at March 31, 2007 this number was 882)

Figure 2 **March 31, 2008 Active Members by Age and Gender**

As the graph indicates, the age group with the highest number of members (20%) is 46-50. It is also interesting to note that 15% of RPNAS Active membership is male.

Figures 3 a, b and c **Members by Branch**

These tables show the number of members (Active and Non-Active) by Branch for 2006, 2007 and as of March 31, 2008. The distribution of members has remained quite consistent over these years.

Figures 4 a and b **New Registrations**

These graphs compare the number of new registrations over the past four years, breaking down those numbers into new registrations by Examination and by Reciprocity. As you can see, the number of new registrations increased significantly in 2007.

Figure 5 **Out Migration**

This table shows the number of RPNs leaving our province and seeking registration in Alberta, Manitoba or British Columbia.

Figures 6 a and b **Members by Primary Employing Agency**

The primary employing agencies of members has changed very little since the previous year with the three main agencies employing RPNs being Hospitals, Personal/Long Term Care and Community Mental Health.

Figures 7 a, b, c, d and e **Members by Primary Practice Area**

You will note very little change in the primary practice area from 2007 to 2008. Primary practice areas are divided into four groups, Direct Care, Administration, Education and Research. Those groups are then broken down into more specific responsibilities and shown in Figures 7 c, d and e.

Figures 8 a and b **Members by Primary Position**

Figures 8 a and b show members by primary position.

Figures 9 a, b and c **Post Basic Education (Highest Level)**

These graphs illustrate the highest level of Post Basic Education that RPNAS members, both active and non-active, have obtained beyond their initial psychiatric nursing education. The graphs clearly indicate that RPNs have a significant interest in continuing education.

Figure 10 **Memberships in Other Associations**

This chart shows the number of members, both active and non-active, who have indicated that they hold licenses with other professional associations. The largest area of other licensure is with other (Non RPN) nursing associations within Canada. The majority of those represent members who are dually licensed as both an RPN and RN.

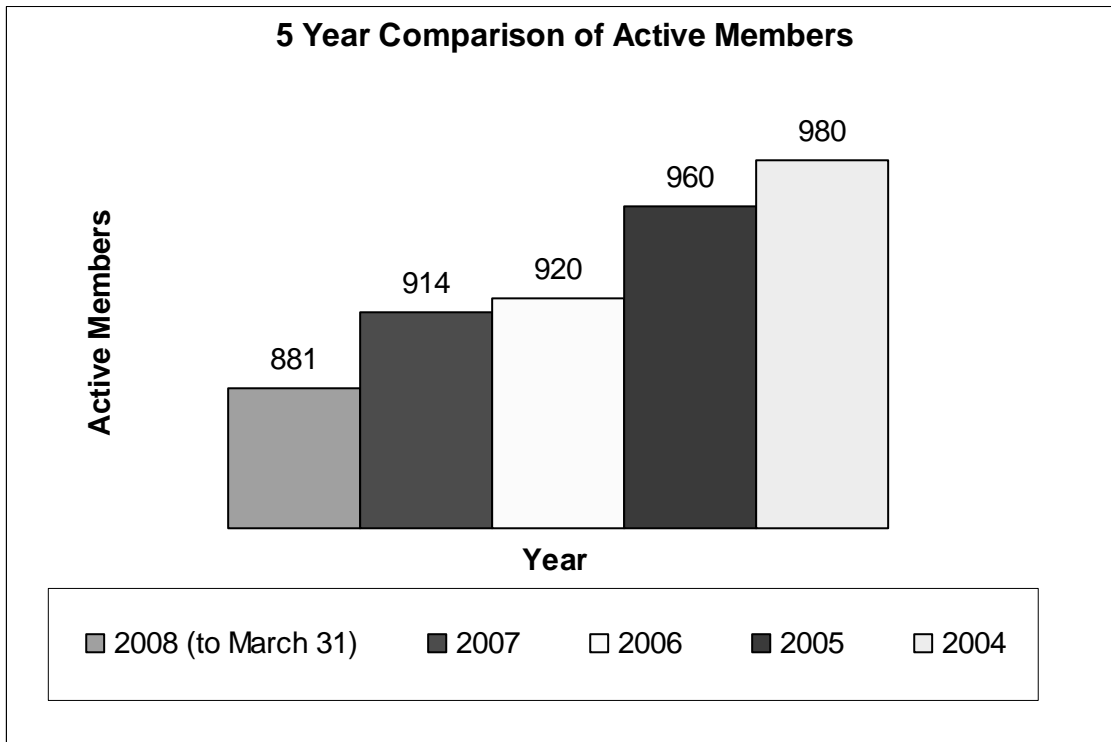


Figure 1

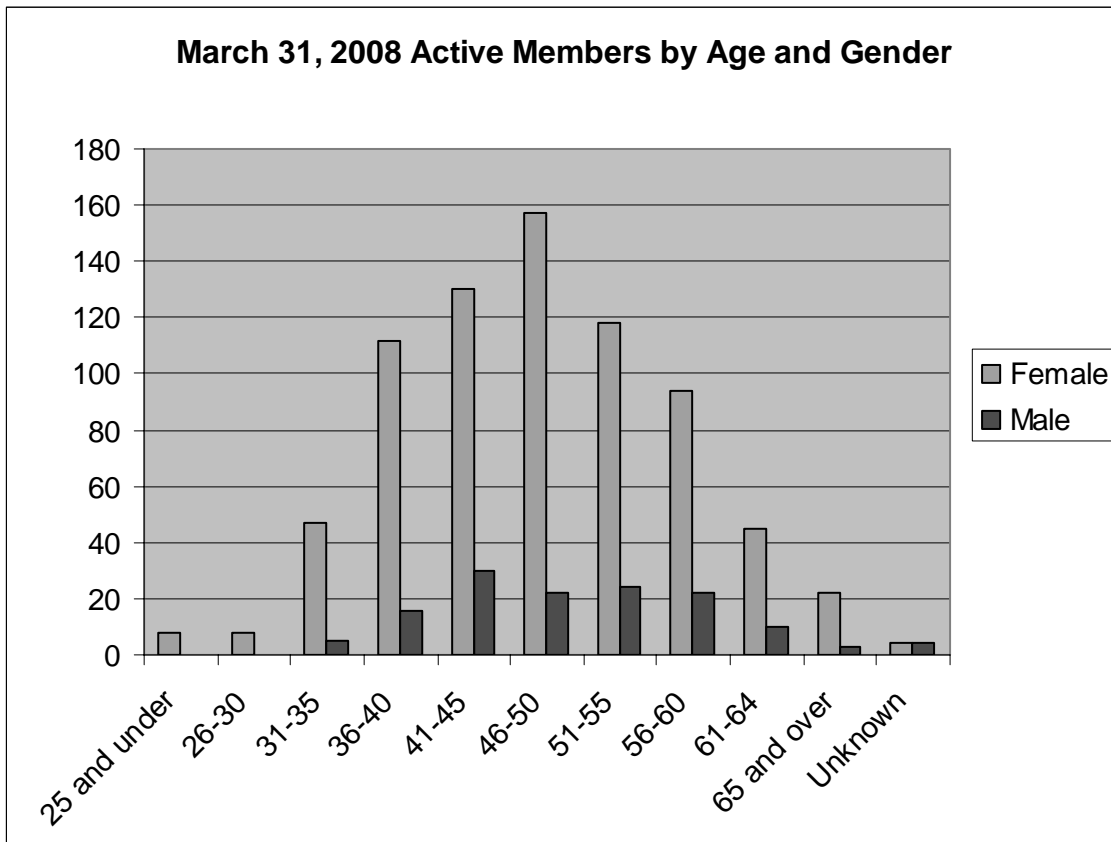


Figure 2

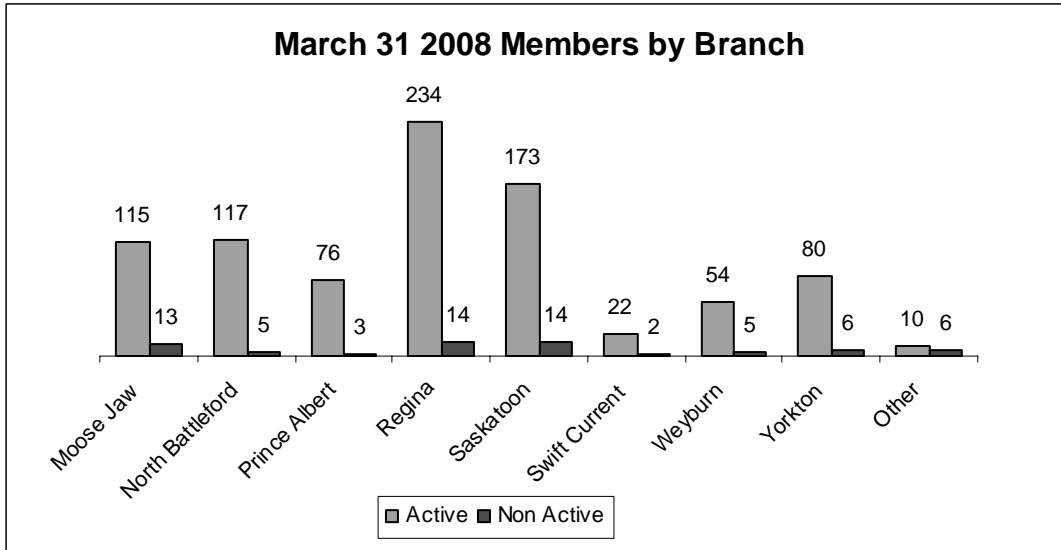


Figure 3(a)

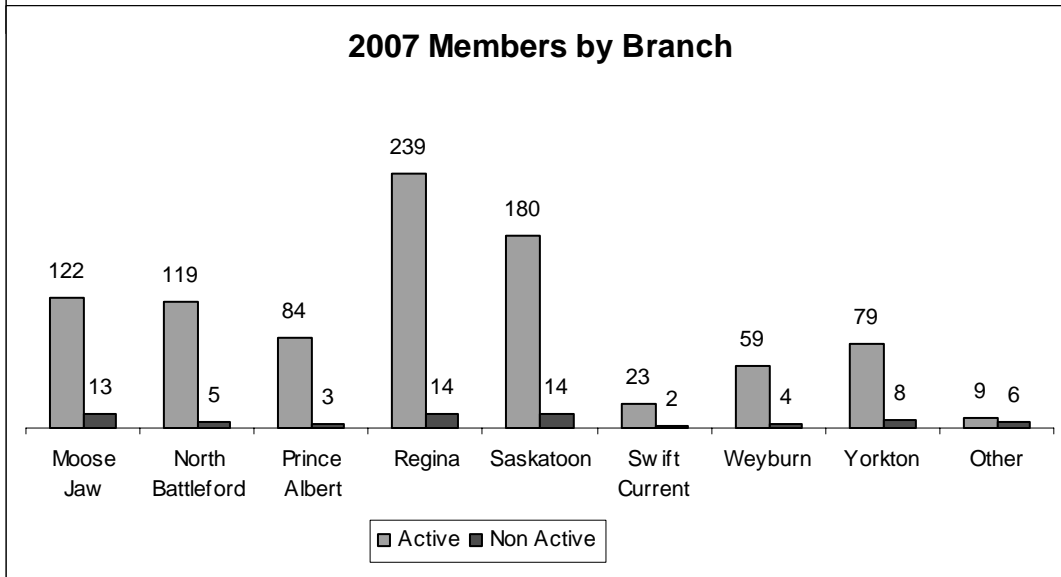


Figure 3(b)

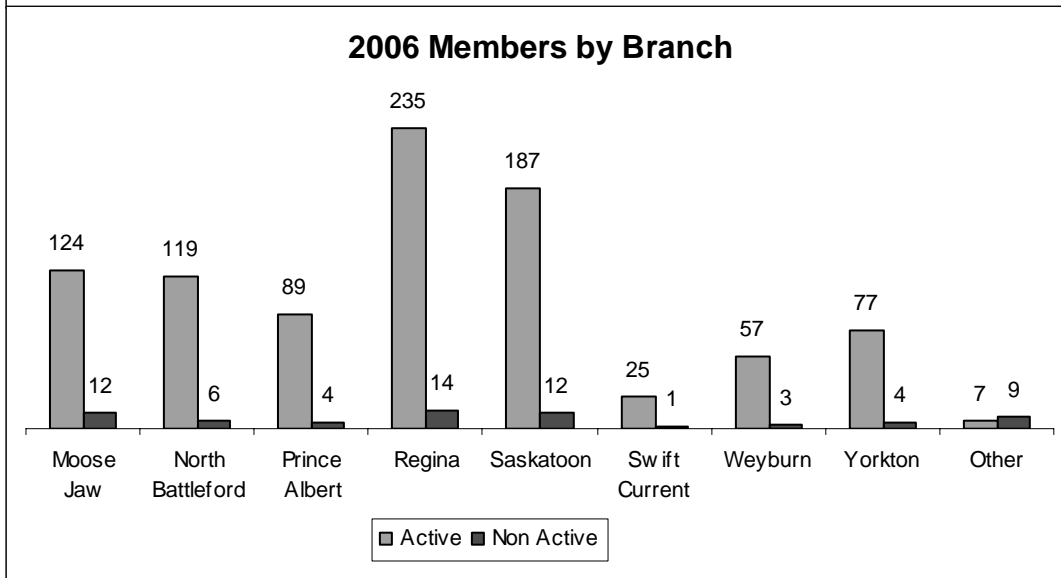


Figure 3(c)

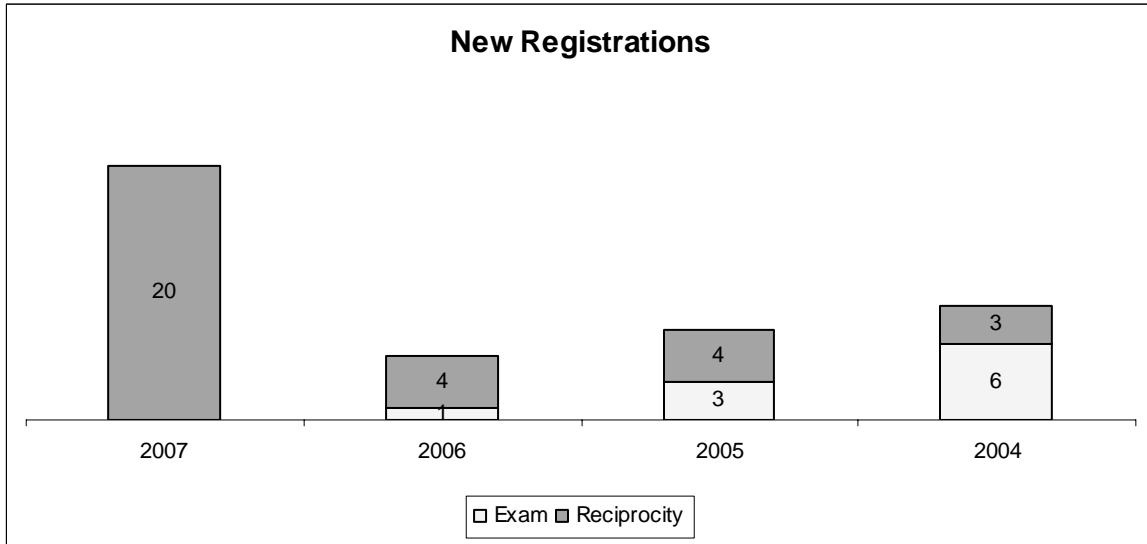


Figure 4(a)

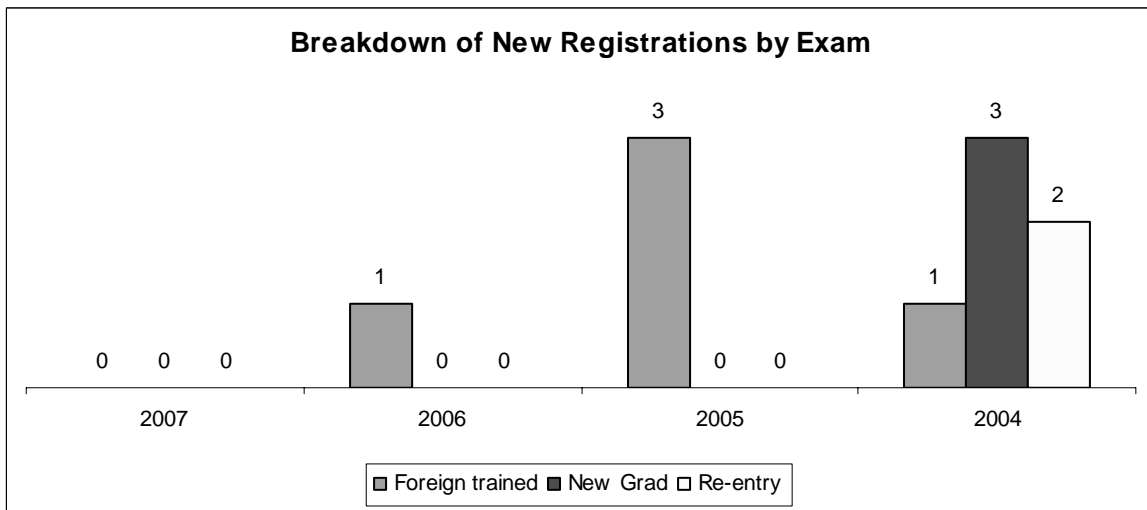


Figure 4(b)

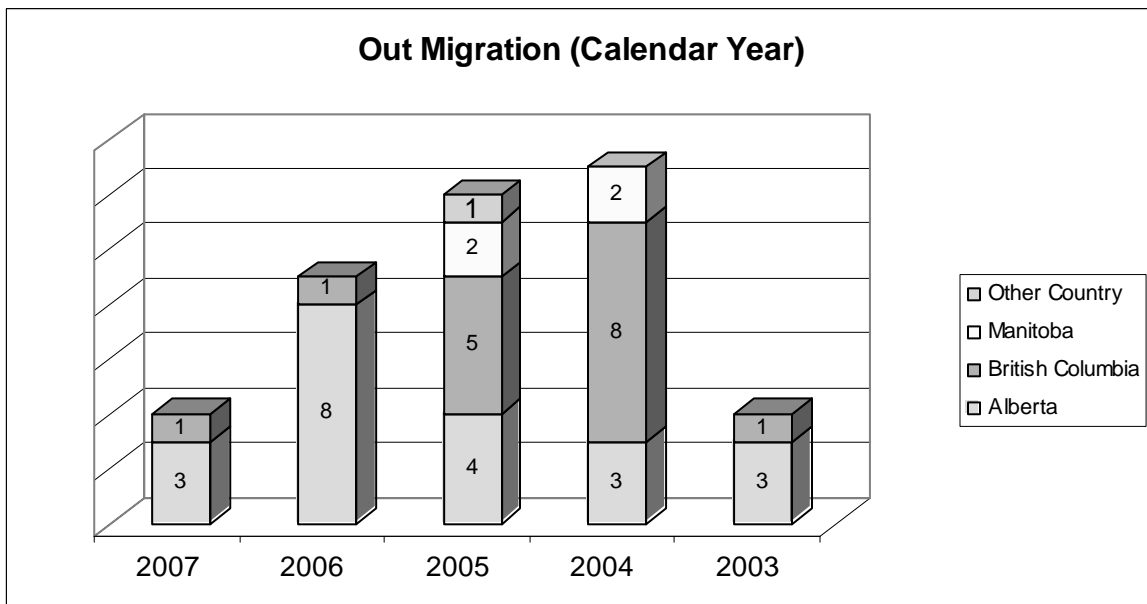


Figure 5

March 31, 2008 Members by Primary Employing Agency

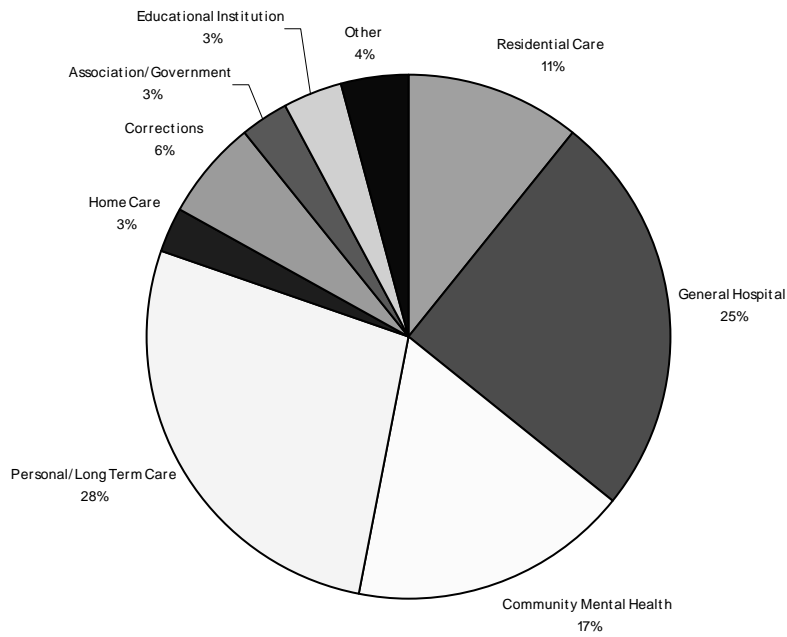


Figure 6(a)

2007 Members by Primary Employing Agency

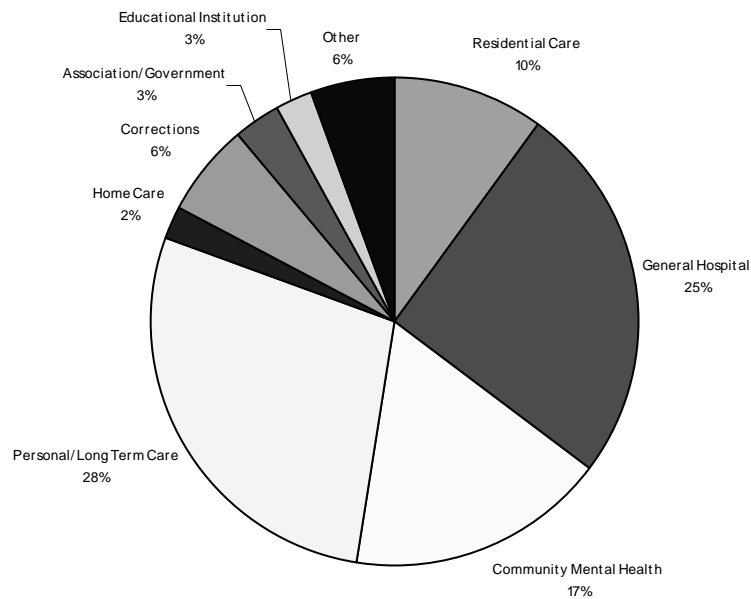


Figure 6(b)

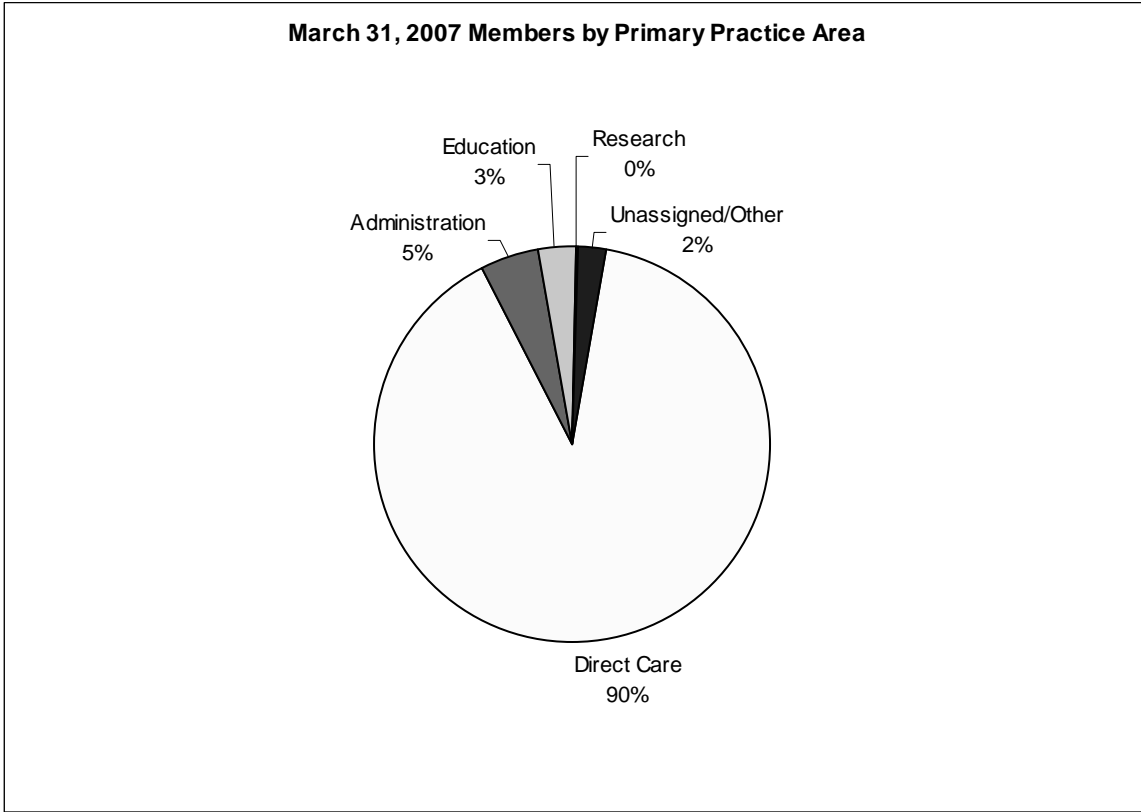


Figure 7(a)

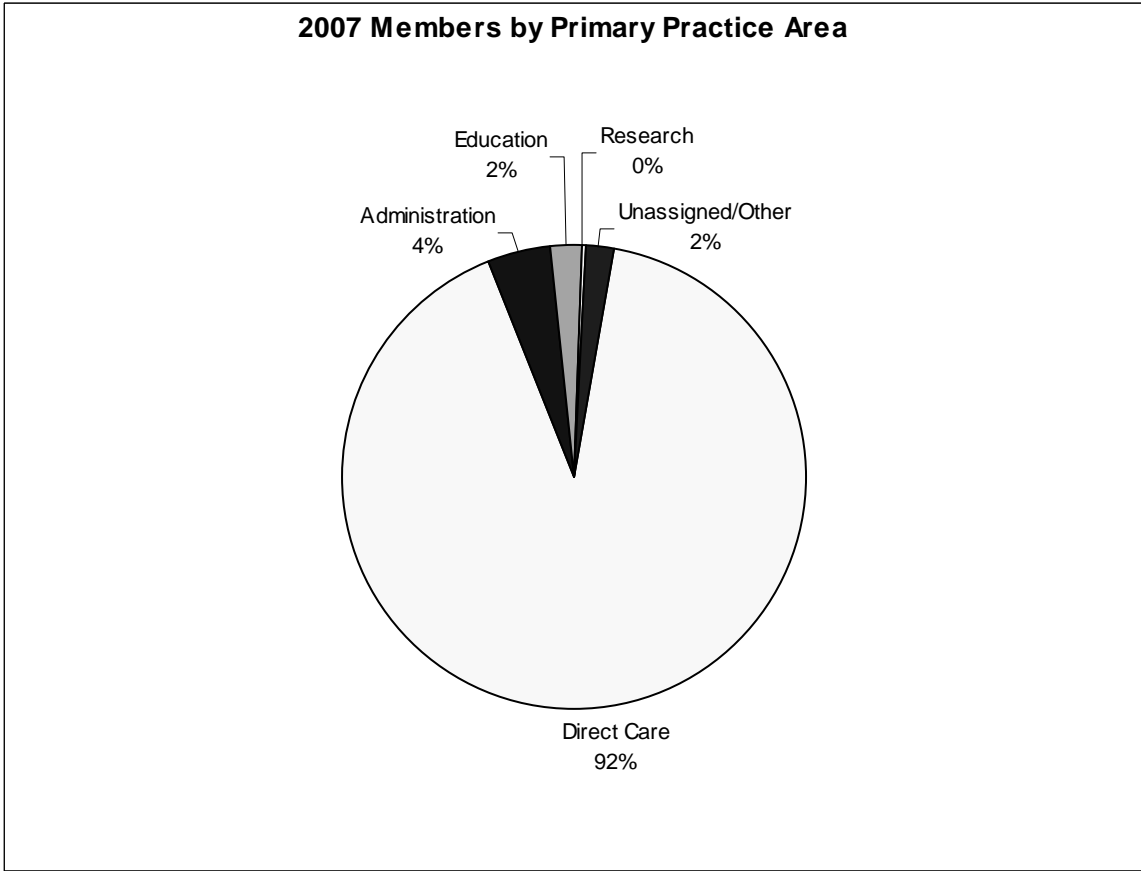


Figure 7(b)

Breakdown of Practice Areas

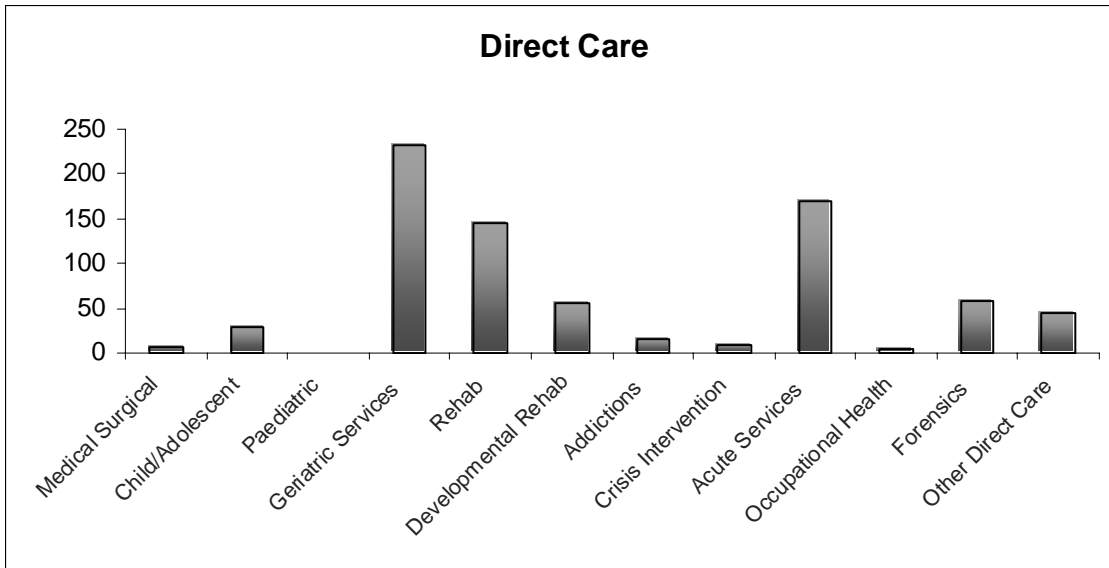


Figure 7(c)

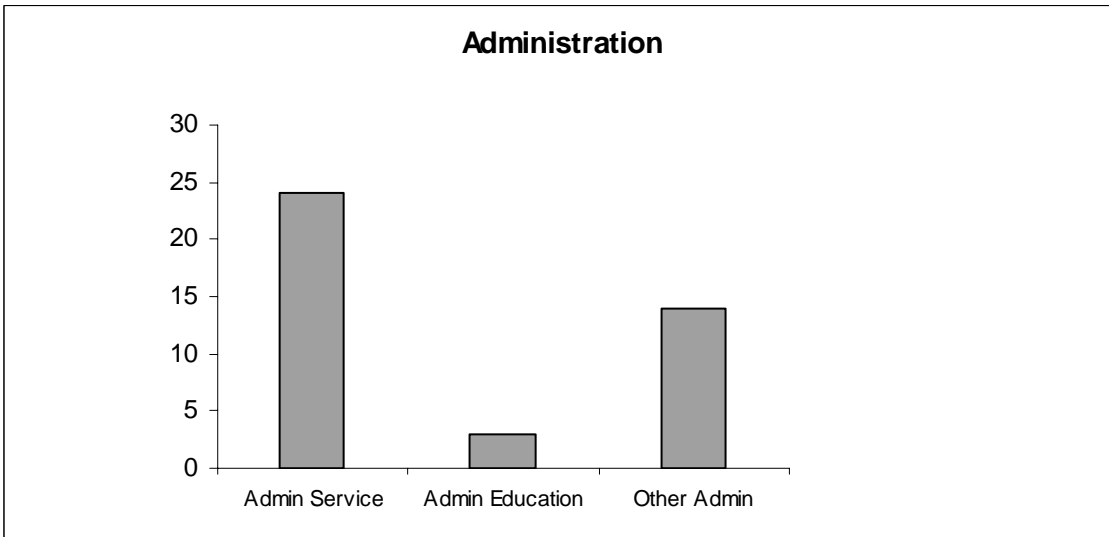


Figure 7(d)

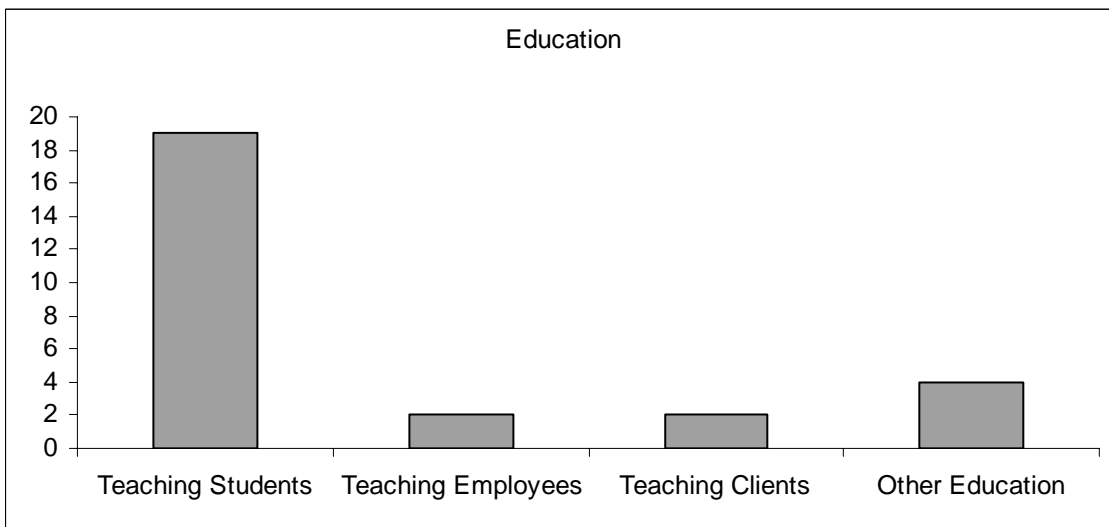


Figure 7(e)

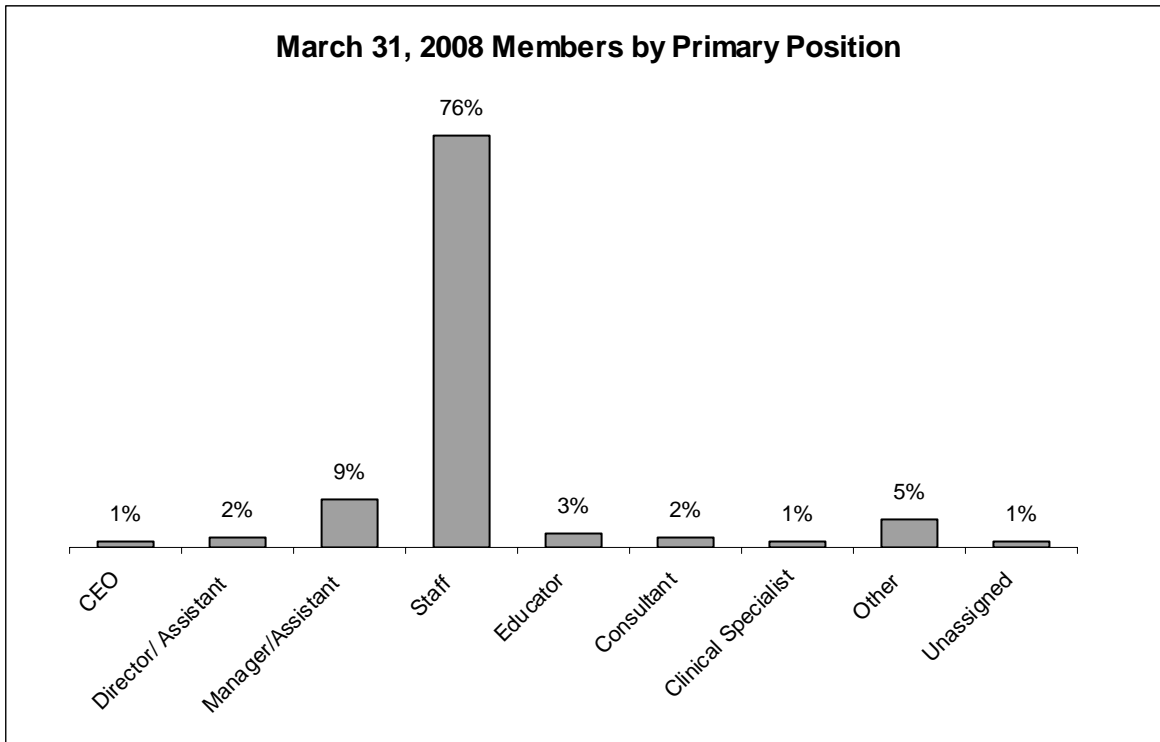


Figure 8(a)

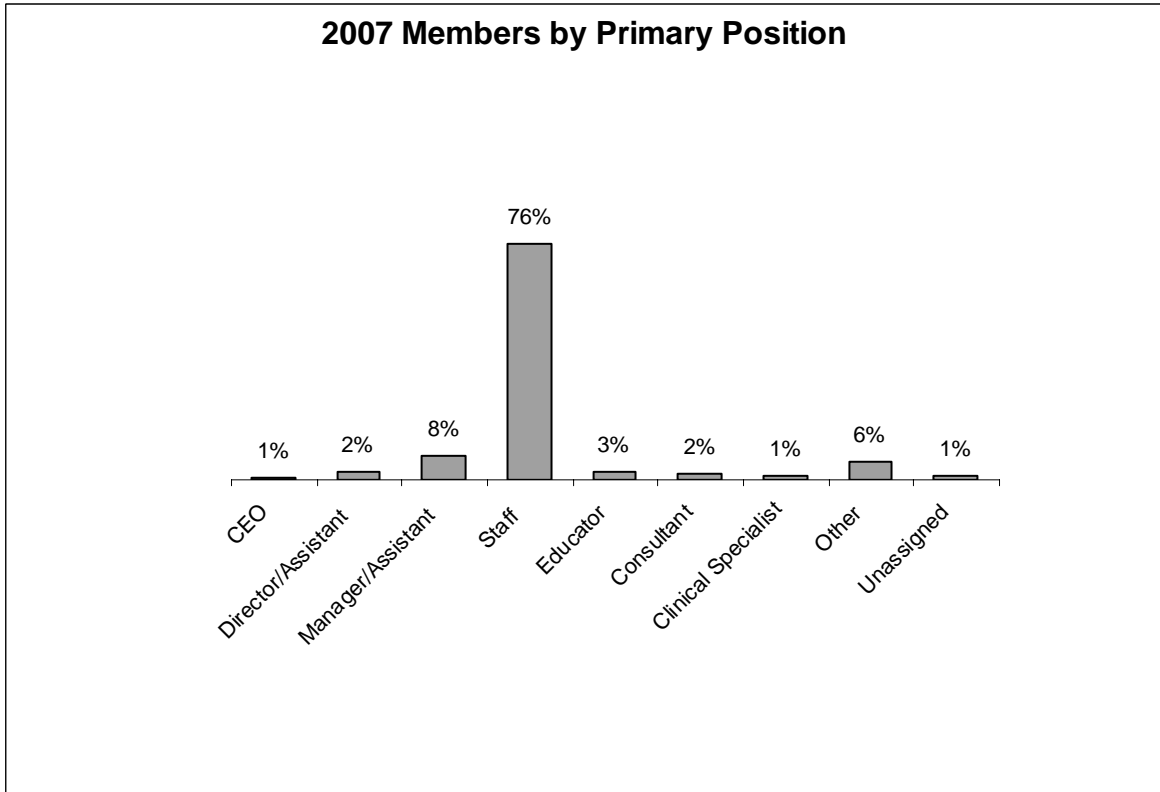


Figure 8(b)

Post Basic Education (Highest Level)

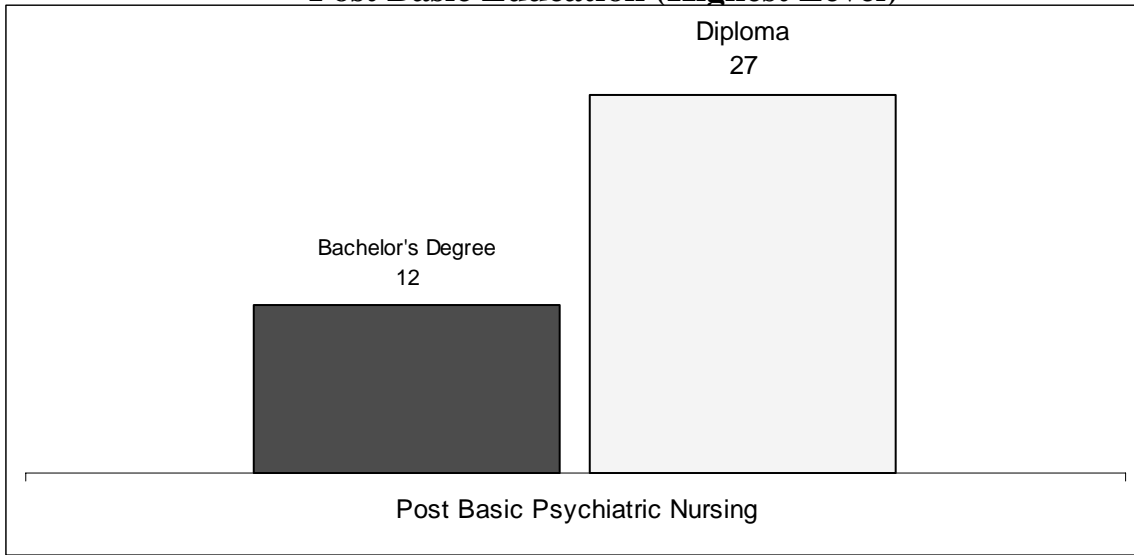


Figure 9(a)

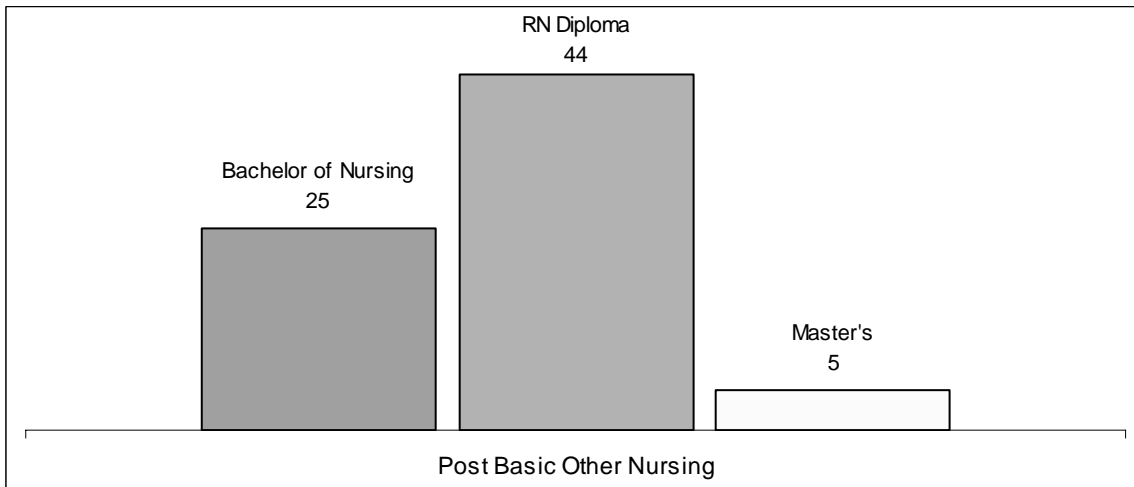


Figure 9(b)

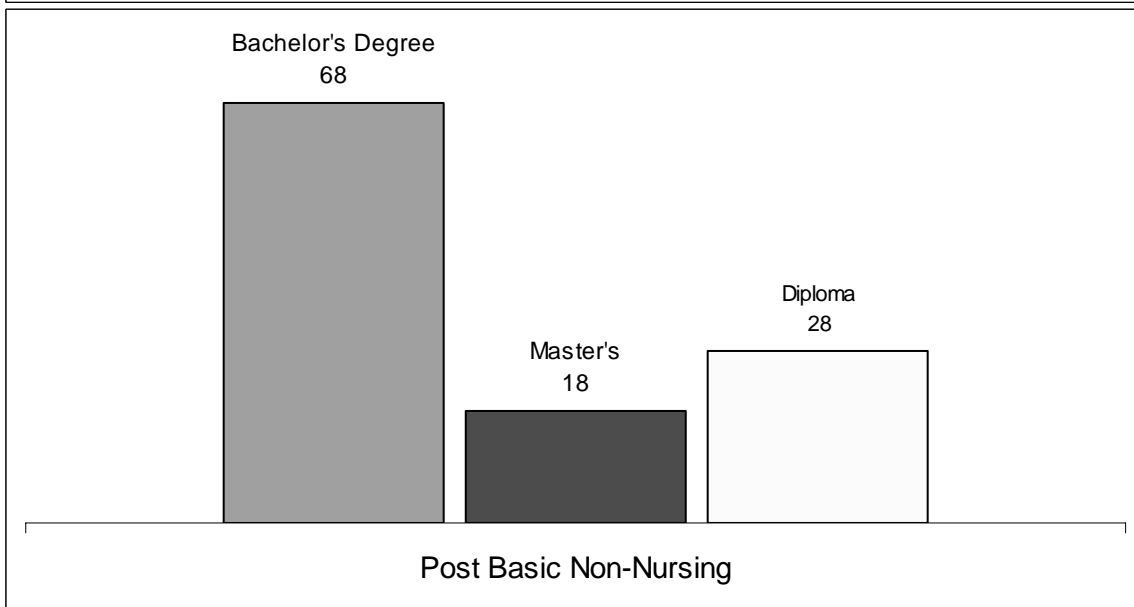


Figure 9(c)

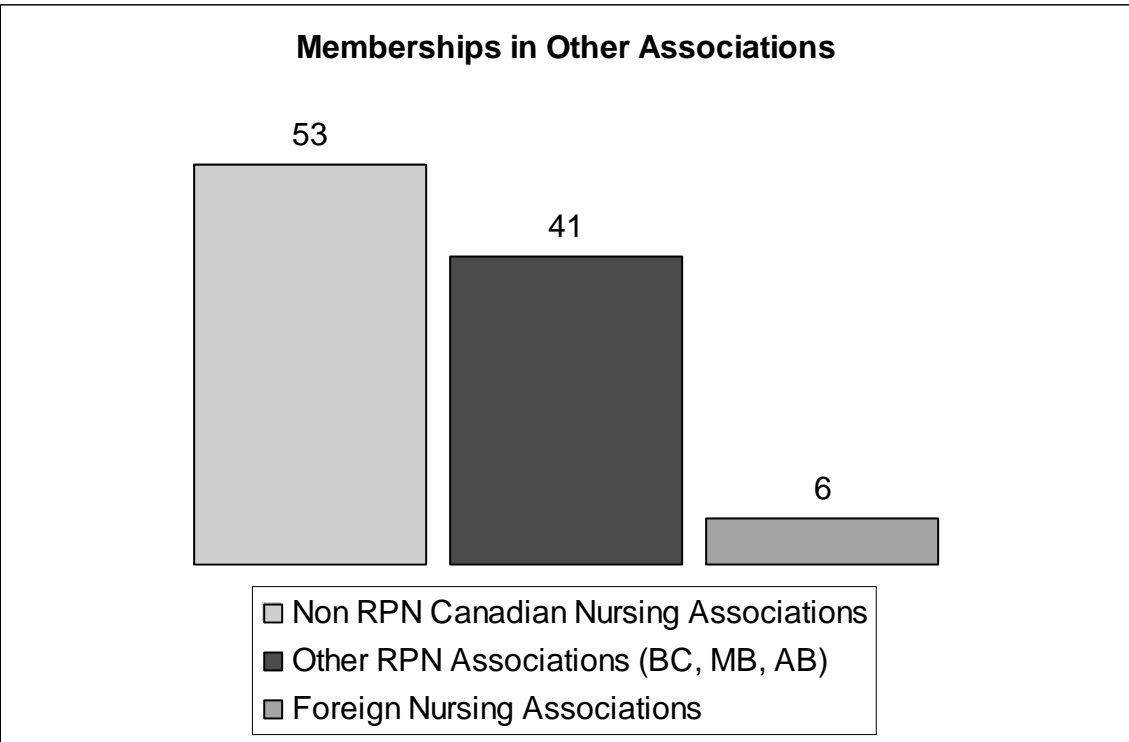


Figure 10

Summary on Actions of 2007 Resolutions

The following bylaw amendments resulted from resolutions at the 2007 AGM:

BYLAW IV - MEMBERSHIP

Section 1 Categories of Membership

- 1 Membership in the association shall consist of the following categories
 - (a) practising membership;
 - (b) graduate psychiatric nurse membership;
 - (c) non-practising membership;
 - (d) student membership;
 - (e) life membership;
 - (e.1) associate membership;
 - (f) honorary membership.

Section 6.1 Associate Membership

- 1 Associate membership in the association shall be:
 - (a) limited to practicing members of the Saskatchewan Registered Nurses Association who have obtained a post graduate degree in psychiatric/mental health.
 - (b) granted on completion of the prescribed application form and payment of the fees set out by the association.
- 2 Associate membership entitles a person to the following privileges:
 - (a) to have a voice but no vote at branch, annual and special meetings of the association;
 - (b) to use the consulting and counseling services of the association; and
 - (c) to receive the association newsletter.

BYLAW VI - FEES

Section 5 Other Membership Fees

- 1 Membership fees associated with all other categories of membership shall be:
 - (a) for non-practicing membership, fifty dollars per membership year;
 - (b) for student membership, five dollars per membership year;
 - (c) for associate membership, fifty dollars per membership year; and
 - (d) for honorary and life membership, no fee will be charged.

As mandated by the *Bylaws for the Registered Psychiatric Nurses Act* the Annual Licensing Fee will be reviewed at the Annual General Meeting.

Reports

COUNCIL COMMITTEES

PROFESSIONAL CONDUCT COMMITTEE

Activities of the past year:

During the period there have been 2 new complaints. One investigation led to a referral to discipline, while one required no further action. One 2006 complaint remains active at this time. There were 2 inquiries requesting explanation of the PCC process. These did not result in any complaint being filed.

A decision was made to have meetings at regular intervals, however this has been difficult to accomplish due to the nature and frequency of complaints.

The committee also plans to initiate a review and upgrade of investigation skills for the members of the committee.

Committee Chair: Delores Maduke, RPN, Saskatoon. Committee members: Brenda Poncelet, RPN, Saskatoon; Lisa Stasiuk, RPN, Moose Jaw; Patricia Thronberg, RPN, Moose Jaw; Jayne Whyte, RPN, Fort Qu'Appelle; Tania Huel, RPN, Weyburn; Laurinda Karakochuk, RPN, Wynyard; Jeanette Kayto, RPN, Regina; Jamie Louiseize, RPN, Prince Albert; Carrie Lavallie, RPN, Prince Albert; Sue Meyers, RPN, Regina.

DISCIPLINE COMMITTEE

During this reporting period the Discipline Committee held two hearings. The Orders of the Discipline Committee are published in the RPNAS Newsletters. The time and commitment that the members on this Committee contribute is much appreciated.

Committee Chair: Theresa Girardin, RPN, Weyburn. Committee members: Angie Craig, RPN, Regina; Jennifer Hennig, RPN, Swift Current; Gary Thronberg, RPN, Moose Jaw; Karen Kenny, RPN, North Battleford; Bruce Reimer, RPN, North Battleford; Ralph MacNab, RPN, Meadow Lake; Margaret Lynch, Public Representative, Regina.

LEGISLATIVE COMMITTEE

Over the past year the Legislative Committee undertook a review of the Bylaws and addressed specific areas such as:

Liability Insurance for Members

The Committee has reviewed the bylaws pertaining to Liability Insurance and will seek further consultation with legal council as well as RPNAS Council before bringing forward any recommendation.

Code of Ethics

The Code of Ethics is being reviewed. A national Code of Ethics has been drafted and the Legislative Committee will appoint one of its members to sit on an interprovincial committee to validate this document.

The Committee is working with a Health Professions Consultant from the Workforce Planning

Branch of Sask Health and has also responded to requests to review regulatory bylaws of other professions such as the paramedics.

The Committee has also recommended that there be RPN representation on an interdisciplinary advisory workgroup for the College of Pharmacists.

The next year will see the Committee continue its work on the current issues and its ongoing review of the Bylaws.

Committee Chair: Mary K Renwick, RPN, Cabri. Committee members: Roberta Jors, RPN, Regina; Linda Rabyj, RPN, Saskatoon; Penni-Sue Caron, RPN, Humbolt; Dan Fraser, RPN, Regina, Don Yates, RPN, North Battleford.

STAFF ADVISORY COMMITTEES

EDUCATION COMMITTEE

The committee, in part, met once in the past year. We reviewed the CPD audits with the majority of the members completing the audit successfully. We had to request further information from only one member. In doing the review we decided to make the audit form more user friendly and to take the “guess work” out by the committee members in regards to the competencies met. During the process we also discussed allowing members to use credits from November and December in the preceding year as the registration forms are to be completed prior to the end of the calendar year and this would give members a chance to include any potential credits in those two months. A recommendation was drafted for Council and a motion was passed to implement the recommendation.

The Committee also reviewed nominations for the RPN award of which there was only one and it went out to Janice Myron. We would like to encourage people to think of deserving members and submit nominations at any time during the year and let’s start recognizing each other’s valuable contributions. The awards are available in the areas of Practice, Education, Administration, Research and Community Service.

We were pleased to give one masters level scholarship to Karen Kawula.

We awarded the Joyce P. Long Memorial Bursary to Kayla Klotz.

Earlier this year we were asked to look at a recommendation by the legislative committee.

In the next year the Committee will be doing the usual work of the committee being: review of the CPD credit audits, looking at scholarship and bursary requests, reviewing the nominees for the RPN award, reviewing exam results for the eligible candidate for the Duke LeFlar award if any.

We will also be looking at a request from the legislation committee, and review information regarding a SIAST scholarship and forward any recommendation to council.

Committee Chair: Roberta Jors, RPN, Regina. Committee Members: Dellina Hodson, RPN, Regina; Sydney Bolt, RPN, Moose Jaw; Lance Hoogeveen, RPN, Regina; Tania Huel, RPN, Weyburn; Geraldine Koban, RPN, Yorkton; Karen Muller, RPN, Regina; Linda Ozga-Bellamy, RPN, Regina.

BRANCHES

MOOSE JAW BRANCH

Business

The Branch organized a meeting for the fall of 2007, however, it was only attended by the branch executive.

Fundraising

The Branch is currently selling wine glasses with the RPN logo. A set of two glasses can be purchased for \$10.00. They hope to have them available for sale at the AGM in Saskatoon.

Branch Executive: Irene Chyz, RPN, President; Wanda Slade RPN, Vice-President, Shelly Smith, RPN, Secretary/Treasurer.

NORTH BATTLEFORD BRANCH

Business

A meeting was held to elect branch executive. A second meeting was held to discuss revenue creation options for the branch.

Special Projects

Branch bylaws will be reviewed and updated in the next year.

The branch is encouraging as many delegates as possible to attend the AGM in June and also World Congress in May.

A fundraiser is being planned for the branch.

Branch Executive: Marion Palidwor, RPN, President; Darcy McIntyre, RPN, Vice-President; Denise Huxley, RPN, Secretary; Yvonne Sawatsky, RPN, Treasurer.

PRINCE ALBERT BRANCH

No report was submitted from the Prince Albert Branch.

REGINA BRANCH

Business

Regina Branch held one formal meeting last year. This was an informational meeting attended by Karl Mack, President, Mary K Renwick, President Elect, and Bob Allen, the Executive Director, to discuss issues of importance to the membership, these include: World Congress, Mobility, Psychiatric Nurse Practitioner, the Strategic Plan, and last but not least the new program. Although this meeting was poorly attended, other meetings were set up at the Regina General Hospital for the benefit of those who could not attend the meeting.

The Regina Branch has made a financial donation to support the World Congress being held in Regina in May. As well, some of our members are volunteering to run a silent auction during World Congress to support our local branch of CMHA members services.

Educational

The Branch has spent time encouraging members to take advantage of the opportunity to attend World Congress in Regina

Professional

A door prize package was sent to the RGH in recognition of RPN day.

Special Projects

The overall goal is to reactivate the branch as it would be a place where our students could learn about the activities of the Association and provide them with opportunities to volunteer as well.

Branch Executive: Candace Alston, RPN, President; Caroline Hoffart, RPN, Secretary; Sue Myers, RPN, Treasurer.

SASKATOON BRANCH

No report was submitted from the Saskatoon Branch.

SWIFT CURRENT BRANCH

Business

Bob Allen, Karl Mack, Candace Alston, and Pam Watt attended a supper meeting to discuss strategic planning, World Congress 2008 and the new diploma program on March 19, 2008.

Educational

Various members have attended several educational sessions over the year.

Social

A pizza lunch was provided during the December meeting.

Professional

During Mental Illness Awareness Week, RPNs and Mental Health were outlined in the Health Region's newsletter.

A member's breakfast was held on May 10th to celebrate RPN Day.

In October the branch purchased a table at Yuk Yuk's comedy night to allow eight CMHA members to attend.

Fundraising

A steak night was held in November. The proceeds were to assist members wanting to attend educational opportunities.

Branch Executive: Jennifer Hennig, RPN, President; Val Hartley, RPN, Vice-President; Shannon Small, RPN, Secretary; Kathy Gordon, RPN, Treasurer.

WEYBURN BRANCH

Business

The Weyburn Branch of the RPNAS held three meetings this year. A supper meeting was held in 2008

at which time RPNAS staff and council provided information regarding the new Psychiatric Nursing education program.

Fundraising

This past year again we held a fundraiser for the Therapeutic Animal Park at Tatagwa View. This also brought more public awareness to our local RPNAS Branch.

Social

A wreath was laid for Remembrance Day at the Cenotaph by one of our Branch members.

Branch Executive: Sharon Mulhall, RPN, President; Jenna Heaman, RPN, Vice-President; June Sorensen, RPN, Secretary; Ann Robillard, RPN, Treasurer.

YORKTON BRANCH

Business

The branch held two meetings last year. We continue to fax meeting notices to health facilities in the area in hope of increasing attendance at our meeting.

There have been changes to our executive. Serge Leonard is now Vice-President and Gerry Honeywich is now secretary.

Educational

Yorkton branch continues to sponsor a \$500.00 bursary yearly. This bursary is offered to a student enrolled in a psychiatric nursing program. There was no candidate in 2007.

Social

A Cake and Coffee party was held celebrating RPN Day on May 10th.

Professional

Our branch continues to promote and celebrate RPN Day, May 10. The Mayor of the City of Yorkton proclaimed May 10, 2007 as RPN Day again last year. A letter will be sent to the City of Yorkton again this year. There was an announcement regarding RPN Day and the Psychiatric Nursing profession printed in the local newspaper. A Cake and Coffee party to celebrate RPN Day was held in the Yorkton Mental Health Centre Auditorium on May 10th.

Fundraising

The Veseys flower and plant bulb fundraiser was complete on March 28, 2008.

Special Projects

Our branch has submitted an application to SIGA regarding having a fundraiser supper at the Painted Hand Casino in Yorkton. We hope, if approved, to have this supper May 7, 2008 and will celebrate RPN Day this night.

Branch Executive: Lana Hunko, RPN, President; Serge Leonard, RPN, Vice-President; Gerry Honeywich, RPN, Secretary; Joan Anuik, RPN, Treasurer.

Registered Psychiatric Nurses Association of Saskatchewan Operating Budget

	Approved 2008-2009	Proposed 2009-2010
REVENUE		
Annual Fees -- Practising	420,000.00	434,300.00
Annual Fees -- Non-practising	3,000.00	3000.00
Temporary Licence	150.00	150.00
Registration Fee	250.00	250.00
Interest	11,000.00	11,000.00
Liability Insurance	6,034.00	6,700.00
Miscellaneous	3,500.00	3,500.00
Registration Examination	350.00	350.00
Total Revenue	\$ 444,284.00	\$ 459,250.00
 EXPENDITURES -- PART "A"		
Administration		
Insurance (office)	750.00	750.00
Salaries	205,000.00	205,000.00
Employee Benefits	41,000.00	41,000.00
Taxes	5,500.00	5,500.00
Telephone	4,000.00	4,000.00
Postage & Bank Charges	8,000.00	8,000.00
Office Supplies	12,000.00	12,000.00
Legal Fees & Audit	6,500.00	6,500.00
Reserve for Depreciation	10,000.00	10,000.00
Printing Costs	6,000.00	6,000.00
Executive Director Expenses	12,000.00	12,000.00
Staff Development	1,500.00	1,500.00
Computer Support	2,000.00	2,000.00
Website	5,000.00	5,000.00
Utilities	12,000.00	12,000.00
 TOTAL	 \$ 331,250.00	 \$ 331,250.00
 Statutory Functions		
Council Meetings	8,000.00	10,000.00
Council Insurance	2,500.00	2,500.00
Council Honoraria	4,000.00	4,000.00
Council Development	2,000.00	2,000.00
Discipline Hearings	10,000.00	10,000.00
Professional Conduct Legal Expenses	10,000.00	10,000.00
PCC Chair Honoraria	500.00	500.00
Discipline Chair Honoraria	500.00	500.00
Registrar's Travel	5,000.00	6,000.00
Elections	1,400.00	1,400.00
International Conference	5,000.00	-
 Total	 \$ 48,900.00	 \$ 46,900.00

	Approved 2008-2009	Proposed 2009-2010
Representative Activities/Services		
Special "Ends" Projects	15,000.00	5,000.00
Provincial/Student Liaison	2,500.00	2,500.00
Special Education Fund	3,000.00	3,000.00
Bursaries/Scholarships	8,000.00	8,000.00
Membership Fees	1,500.00	1,500.00
Delegate Expenses	1,500.00	1,500.00
Executive Travel	2,000.00	3,000.00
Total	\$ 33,500.00	\$ 24,500.00
Membership Services		
Annual Membership Meeting	4,000.00	6,000.00
Liability Insurance	6,250.00	7,000.00
RPNews	8,600.00	8,600.00
Annual Report (production/ mailing)	7,500.00	7,500.00
Public Relation Expenses	5,000.00	5,000.00
Total	\$ 31,350.00	\$ 34,100.00
TOTAL EXPENDITURES -- PART "A"	\$ 445,000.00	\$ 436,750.00
EXPENDITURES -- PART "B"		
Statutory Committees	10,000.00	10,000.00
• Legislation		
• Professional Conduct		
• Discipline		
• Nominations		
Staff Projects	10,000.00	12,500.00
• Education Program Initiatives		
• RPNC		
TOTAL EXPENDITURES -- PART "B"	\$ 20,000.00	\$ 22,500.00
TOTAL EXPENDITURES "A & B "	\$ 465,000.00	\$ 459,250.00
Surplus/(Deficit)	\$ (20,716.00)	-

**Registered Psychiatric Nurses
Association of Saskatchewan
Financial Statements**
March 31, 2008

Management's Responsibility

To the Members of Registered Psychiatric Nurses Association of Saskatchewan:

Management is responsible for the preparation and presentation of the accompanying financial statements, including responsibility for significant accounting judgments and estimates in accordance with Canadian generally accepted accounting principles. This responsibility includes selecting appropriate accounting principles and methods, and making decisions affecting the measurement of transactions in which objective judgment is required.

In discharging its responsibilities for the integrity and fairness of the financial statements, management designs and maintains the necessary accounting systems and related internal controls to provide reasonable assurance that transactions are authorized, assets are safeguarded and financial records are properly maintained to provide reliable information for the preparation of financial statements.

The Council is composed entirely of Councillors who are neither management nor employees of the Association. The Council is responsible for overseeing management in the performance of its financial reporting responsibilities, and for approving the financial information included in the annual report. The Council has the responsibility of meeting with management and external auditors to discuss the internal controls over the financial reporting process, auditing matters and financial reporting issues. The Council is also responsible for recommending the appointment of the Association's external auditors.

Meyers Norris Penny LLP, an independent firm of Chartered Accountants, is appointed by the members to audit the financial statements and report directly to them; their report follows. The external auditors have full and free access to, and meet periodically and separately with, both the Council and management to discuss their audit findings.

April 23, 2008

Executive Director



MEYERS NORRIS PENNY LLP

Auditors' Report

To the Members of Registered Psychiatric Nurses Association of Saskatchewan:

We have audited the balance sheet of Registered Psychiatric Nurses Association of Saskatchewan as at March 31, 2008, and the statements of changes in net assets, revenues and expenses and cash flows for the year then ended. These financial statements are the responsibility of the Association'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 the 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 Association as at March 31, 2008 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Meyers Norris Penny LLP

Regina, Saskatchewan

April 23, 2008

Chartered Accountants

Registered Psychiatric Nurses Association of Saskatchewan

Balance Sheet

As at March 31, 2008

	<i>2008</i>	<i>2007</i>
Assets		
Current		
Cash	44,214	300
Short-term investments (<i>Note 4</i>)	346,886	367,893
Accounts receivable	-	50
Accrued interest receivable	2,216	1,556
Inventory and prepaid expenses	29,253	22,139
	422,569	391,938
Capital assets (<i>Note 5</i>)	99,675	107,513
Long-term investments (<i>Note 6</i>)	304,838	317,661
	827,082	817,112
Liabilities		
Current		
Bank indebtedness	-	11,409
Accounts payable and accrued liabilities	24,451	16,540
Deferred revenue	323,544	301,547
	347,995	329,496
Net assets		
Investment in capital assets	99,675	107,513
Capital equipment reserve	9,225	10,000
Contingency reserve	127,352	127,352
Bursary reserve	52,846	53,846
Operating surplus	189,989	188,905
	479,087	487,616
	827,082	817,112

Approved on behalf of the Council

Councilor

Councilor

Registered Psychiatric Nurses Association of Saskatchewan
Statement of Changes in Net Assets

For the year ended March 31, 2008

	<i>Investment in Capital Assets</i>	<i>Capital Equipment Reserve</i>	<i>Contingency Reserve</i>	<i>Bursary Reserve</i>	<i>Operating Surplus</i>	<i>2008</i>	<i>2007</i>
Balance – beginning of year	107,513	10,000	127,352	53,846	188,905	487,616	471,856
Transitional Adjustment (Note 3)	-	-	-	-	(35,254)	(35,254)	-
	107,513	10,000	127,352	53,846	153,651	452,362	471,856
Excess of revenues over expenses for the year	-	-	-	-	27,725	27,725	15,760
Purchase of capital assets	775	(775)	-	-	-	-	-
Amortization of capital assets	(8,613)	-	-	-	8,613	-	-
Bursaries awarded during the year	-	-	-	(1,000)	-	(1,000)	-
Transfer to reserves (from surplus) (Note 10)	-	-	-	-	-	-	-
Balance – end of year	99,675	9,225	127,352	52,846	189,989	479,087	487,616

The accompanying notes are an integral part of these financial statements

Registered Psychiatric Nurses Association of Saskatchewan

Statement of Revenues and Expenses

For the year ended March 31, 2008

	2008	2007
Revenues		
Active fees		
Licensing	409,807	404,416
Members' liability insurance	6,526	6,391
Administration fees	565	350
Non-active fees	3,125	3,181
Temporary licenses	767	148
Registration fees	1,050	350
Examination fees	875	350
Investment income	20,095	23,422
Promotional	155	1,815
Miscellaneous	6,420	15,994
	449,385	456,417
Expenses		
Amortization	8,613	8,559
Committees	10,423	11,519
Council and membership meetings	21,048	16,165
Discipline hearings and professional conduct	37,233	35,654
Donations	230	1,250
Employee benefits and superannuation	44,534	37,437
Insurance	654	722
International conference	-	10,629
Liability insurance	6,514	7,572
Membership development	2,993	1,543
Membership fees	2,338	1,491
Newsletter	11,622	11,556
Occupancy	9,278	10,816
Office supplies and postage	21,766	22,595
Printing	1,691	1,976
Professional services	8,157	6,537
Promotional	11,899	12,313
Property taxes	5,204	5,088
Salaries	180,451	154,639
Special projects	19,751	40,408
Student liaison activities	188	170
Telephone	3,593	3,666
Travel – executive	25,469	35,145
	433,649	437,450
Other		
Impairment of long-term investments (<i>Note 6</i>)	-	(3,207)
Unrealized gains (loss) on investment	11,989	-
	27,725	15,760
Excess of revenues over expenses for the year	27,725	15,760

The accompanying notes are an integral part of these financial statements

Registered Psychiatric Nurses Association of Saskatchewan

Statement of Cash Flows

For the year ended March 31, 2008

	2008	2007
Cash provided by (used for) the following activities		
Operating		
Cash received from members	452,893	428,980
Cash paid to suppliers	(142,589)	(169,219)
Cash used for Council and Committee activities	(59,466)	(63,958)
Cash paid to employees	(223,184)	(188,013)
Investment income received	19,435	23,622
	47,089	31,412
Investing		
Purchase of capital assets	(775)	(5,455)
Purchase of investments	(170,991)	(207,622)
Disposal of investments	180,000	170,000
	8,234	(43,077)
Increase (decrease) in cash resources	55,323	(11,665)
Cash (deficiency) resources, beginning of year	(11,109)	556
Cash resources (deficiency), end of year	44,214	(11,109)
Cash resources (deficiency) is composed of:		
Cash	44,214	300
Bank indebtedness	-	(11,409)
	44,214	(11,109)

The accompanying notes are an integral part of these financial statements

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the year ended March 31, 2008

1. Governing statutes and nature of operations

The Registered Psychiatric Nurses Association of Saskatchewan (the "Association") is the professional Association with regulatory authority for the registration and licensing of psychiatric nurses in Saskatchewan and is incorporated under a special act of Saskatchewan. The Association is exempt from income tax under paragraph 149(1)(1) of the *Federal Income Tax Act*.

2. Accounting policies

These financial statements have been prepared in accordance with Canadian generally accepted accounting principles and include the following significant accounting policies:

Inventory

Inventory is valued at the lower of cost and net realizable value.

Capital assets

Capital assets, including building and furniture and equipment, are recorded at cost less accumulated amortization. Computer software is expensed in the year of acquisition.

Amortization of capital assets is provided using the straight-line method at the following rates:

	Method	Rate
Building	Straight-line	20 years
Furniture and equipment	Straight-line	3 – 5 years

Revenue recognition and deferred revenue

Membership fees, both active and non-active, which are based on a calendar year, are recognized as revenue in the fiscal year that they are applicable to. Deferred revenue represents fees received during the year that relate to the next fiscal period. All other revenue is recognized when earned.

Financial instruments

The Association has classified cash, short-term investments, long-term investments, bank indebtedness and accounts payable and accrued liabilities as held for trading financial instruments; and accounts receivable and accrued interest receivable as loans and receivable financial instruments.

Held for trading financial assets and liabilities are financial instruments that are acquired or incurred principally for the purpose of selling or repurchasing the instrument in the near term or are initially designated as held for trading. These instruments are initially recognized at their fair value. Fair value is approximated by the instruments' initial cost in a transaction between unrelated parties. Held for trading financial instruments are carried at fair value with both realized and unrealized gains and losses included in the statement of revenue and expenses. Transactions to purchase or sell these items are recorded on the settlement date.

Loans and receivables are initially recognized at their fair value. Fair value is approximated by the instruments' initial cost in a transaction between unrelated parties. Loans and receivables are subsequently measured at their amortized cost, using the effective interest method.

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the year ended March 31, 2008

Transaction costs related to held for trading financial instruments are expensed as incurred. Transaction costs related to loans and receivables are netted against the carrying value of the asset and are recognized over the expected life of the instrument using the effective interest method.

Measurement uncertainty

The preparation of financial statements in conformity with Canadian generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Amortization is based on the estimated useful lives of the capital assets. These estimates are reviewed periodically and, as adjustments become necessary, they are reported in earnings in the periods in which they become known.

Reserves

Contingency reserve

The contingency reserve represents an amount established by the Governing Council for the purpose of providing for unexpected events. The interest earned on funds established for the contingency reserve remains as part of the general operation of the Association.

Capital equipment reserve

The capital equipment reserve was established by the Governing Council for the purpose of purchasing capital assets. The interest earned on funds established for the capital equipment reserve remains as part of the general operation of the Association.

Bursary reserve

A bursary reserve was established by the Governing Council for the purpose of providing bursaries each year. Interest relating to the bursary reserve is allocated to the operating surplus, and bursary awards are charged to the reserve annually.

Recent accounting pronouncements

In December 2006, the Canadian Institute of Chartered Accountants issued Section 3862 Financial Instruments – Disclosures and Section 3863 Financial Instruments – Presentation to replace Section 3861 Financial Instruments – Disclosure and Presentation. These new Sections are effective for interim and annual financial statements with fiscal years beginning on or after October 1, 2007, but may be adopted in place of Section 3861, before that date. The Association does not expect the adoption of this new standard to have a material impact on its financial statements, however, these standards will have an impact on the financial statement disclosures.

CICA Handbook Section 3031 Inventories replaces corresponding Section 3030 and establishes new standards for the measurement and disclosure of inventories. The new Section prescribes that inventories should be measured at the lower of cost and net realizable value and provides guidance on the determination of cost. This standard is effective for interim and annual financial statements relating to fiscal years beginning on or after January 1, 2008. The Association does not expect the adoption of this new standard to have a material impact on its financial statements.

The new recommendations of the Canadian Institute of Chartered Accountants (CICA) for capital disclosures, CICA Handbook Section 1535, establish standards for disclosing information about the Association's capital (debt and equity) and how it is managed. Specifically, information should be disclosed to enable users of the financial statements to evaluate the Association's objectives, policies and processes for managing capital. The Association does not expect to be materially affected by the new recommendations.

The above accounting pronouncements will become effective for the Association's 2009 fiscal year.

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the year ended March 31, 2008

3. Change in accounting policy

Effective April 1, 2007, the Association adopted the Canadian Institute of Chartered Accountants' new recommendations for the recognition and measurement of financial instruments, and amendments to the existing presentation and disclosure standards. CICA 3855 Financial Instruments – Recognition and Measurement establishes standards for recognizing and measuring financial assets, financial liabilities and derivatives. CICA 3861 Financial Instruments – Disclosure and Presentation discusses the presentation and disclosure of these items. Financial instruments are defined as a contractual right to either receive or deliver cash or other financial instrument to another party.

As described in Accounting Policies, Note 2, the Association recognizes held for trading financial assets and liabilities at their fair value. Prior to this classification, required at the time the Association adopted the Financial Instruments standards, these items were recognized at their historical cost, adjusted for any permanent impairment. The effect of this change in accounting policy in the current period was to decrease long-term investments by \$35,254 and decrease opening operating surplus by \$35,254. There was no significant effect to any of the other financial instruments as a result of the recommendations adopted. The new requirements were applied prospectively and prior periods have not been restated.

2. Short-term investments

	2008	2007
Premium Treasury Bill mutual fund	338,912	360,151
Treasury Bill mutual fund	7,974	7,742
	346,886	367,893

3. Capital assets

	<i>Cost</i>	<i>Accumulated Amortization</i>	<i>2008 Net Book Value</i>	<i>2007 Net Book Value</i>
Land	38,250	-	38,250	38,250
Building	124,576	64,551	60,025	66,242
Furniture and equipment	72,704	71,304	1,400	3,021
	235,530	135,855	99,675	107,513

4. Long-term investments

	2008	2007
Cash	9,310	53,868
Canadian Bonds maturing at dates ranging between April 2012 and December 2015 (2007 – July 2012 and December 2015), with interest at varying rates ranging from 3.80% to 6.00% (2007 – 5.20% to 6.00%)	189,708	137,030
Equity investments	105,820	126,763
	304,838	317,661

Registered Psychiatric Nurses Association of Saskatchewan

Notes to the Financial Statements

For the year ended March 31, 2008

At year-end, the quoted market value of the long-term investments was \$304,838 (2007 - \$282,407) and the carrying value was \$319,477 (2007 - \$317,661). During the year, the investments were written down by \$nil (2007 - \$3,207) for other than temporary impairment.

5. Financial instruments

The Association as part of its operation carries a number of financial instruments, which include cash, short-term investments, accounts receivable, accrued interest receivable, long-term investments, bank indebtedness and accounts payable and accrued liabilities. It is management's opinion that the Association is not exposed to significant interest, currency or credit risks arising from these financial instruments except as otherwise disclosed.

Fair value

The carrying amount of the Association's financial instruments approximates their fair value due to their relatively short-term maturity, except for long-term investments which is disclosed in Note 6.

Interest rate risk

Interest rate risk is the risk that the value of a financial instrument might be adversely affected by a change in the interest rates. Changes in market interest rates may have an effect on the cash flows associated with some financial assets and liabilities, known as cash flow risk, and on the fair value of other financial assets or liabilities, known as price risk. The Association is exposed to interest rate risk primarily relating to its short-term and long-term investments.

6. Pension plan

Employees of the Registered Psychiatric Nurses Association of Saskatchewan participate in the Saskatchewan Healthcare Employees' Pension Plan (SHEPP). The plan is a defined benefit plan and the pension benefits and assets are for all members of the plan and are not segregated by participating organization. The Association remits the contributions on a monthly basis based on the contribution rate provided by SHEPP, which totalled \$9,663 for the year (2007 - \$9,357).

9. Commitments

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

2009	7,860
2010	7,860
2011	720

10. Interfund transfers

The Council approved a transfer of \$nil (2007 - \$5,455) from operating surplus and allocated \$nil (2007 - \$5,455) of the fund to capital equipment reserve to cover the costs of capital asset additions during the year and \$nil (2007 - \$nil) to the bursary reserve. In addition, transfers of \$8,613 (2007 - \$8,559) from operating surplus to investment in capital assets were approved to cover the amortization costs incurred for the year.

11. Comparative figures

Certain comparative figures have been reclassified to conform with current year presentation.

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**REGISTERED
PSYCHIATRIC
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SASKATCHEWAN**

Seeing People Through

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