

NANB REPORT 18

ANNUAL 20



Nurses Association
OF NEW BRUNSWICK



MANDATE

NANB regulates registered nurses and nurse practitioners in New Brunswick to ensure the provision of safe, competent and ethical care in the interest of the public.

PUBLIC PROTECTION

NANB has adopted a three-pronged approach to self-regulation. NANB strives to:

1. Promote good practice that meets the standards for nursing practice and nursing education.
2. Prevent nursing education and nursing practice that does not meet the standards through program review, consultation, provision of information and education.
3. Intervene when nursing education and/or nursing practice does not meet the required standards for the provision of safe, competent nursing services to the New Brunswick public.

By placing most of our emphasis on promotion of best practices, the need for discipline interventions is kept to a minimum. While incidents of misconduct or incompetence are rare, given the number of nurses providing service to the public, they do occur.

ANNUAL REPORT

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ABOUT NANB

The Association has been the professional regulatory body for registered nurses and nurse practitioners in New Brunswick since 1916. The *Nurses Act* defines our responsibilities. The purpose of regulation is to protect the public by assuring nursing education programs are meeting best practice and standards, and to assure

that patients/clients/communities are receiving safe competent nursing services. NANB supports nurses in achieving safe, competent care through consultation, information, education and collaboration with key stakeholders. NANB completes the work of nursing regulation in a number of ways:



Although NANB sets the standards for nursing education and nursing practice, it is registered nurses and registered nurse practitioners who demonstrate the standards through daily delivery of safe, competent and ethical nursing practice.

- Establish required standards for nursing practice and nursing education;
- Set entry to practice requirements for Canadian and internationally educated graduates and nurses;
- Review regularly the nursing education programs, to assure that the standards for nursing education are met;
- Maintain requirements for registration to ensure nurses working in New Brunswick are competent to practice;
- Support internationally educated nurse candidates through the assessment and/or education process to enable nursing registration in New Brunswick; and
- Respond to complaints received from members, employers and the public. NANB committees, with members and public participants, complete the screening of complaints, professional conduct review and disciplinary processes.

TRENDING IN 2018: LEGALIZATION OF CANNABIS AND NATIONAL OPIOID CRISIS

Supporting Nursing Practice: Cannabis

As Canada and New Brunswick prepared for legalization of cannabis, it was important for nurses to consider the associated public health implications and work to mitigate the harms associated with non-medical cannabis use. NANB released a Position Statement: *Non-Medical Cannabis Use* supporting a harm reduction approach to cannabis use. Nurses, as the largest group of healthcare providers, and often a client's first point of contact with the health care system, have the responsibility to assess, educate and support cannabis users. NANB created tools (FAQ: *Non-Medical Cannabis Use*, Cannabis Toolkit) to support nurses with access to evidence-based information on cannabis, including the health effects of cannabis use, consumption methods and harm reduction resources.

Nurses also need to consider their accountability to the *Code of Ethics* and the *Standards of Practice for Registered Nurses* in relation to their own cannabis use (medical or recreational). To support nursing professionals with this process NANB worked



collaboratively with the Association of New Brunswick Licensed Practical Nurses (ANBLPN) and released Cannabis FAQ.

In 2019, NANB will release the *Practice Guideline: Caring for Client's Authorized to Use Medical Cannabis* (joint NANB/ANBLPN) and will continue to monitor and share information to our members on cannabis use.



Supporting Nursing Practice: Opioid Crisis

RNs and NPs are concerned with the opioid crisis and its impact on Canadians and New Brunswickers. To support nurses, who are providing healthcare in communities and many other settings, NANB created numerous resources: *When can Registered Nurses (RN) Administer Naloxone?*, *Problematic Substance Use: Re-entry to Nursing Practice*, and an Opioid Toolkit. The resources in the Opioid Toolkit are directed both for healthcare providers and the public. The Toolkit has information on harm reduction, prescribing opioids, problematic substance use, opioid medication management and a brochure on managing a suspected overdose. NANB also published two articles in the Fall 2018 INFO Nursing specific to the Opioid Crisis in New Brunswick:

- *Opioids: An RNs Journey* by Martine Levasseur, RN Addiction Services—Edmundston
- *An Interview with Dr. Jennifer Russel* regarding the government of New Brunswick's plan related to the Opioid Crisis in New Brunswick

NURSING EDUCATION

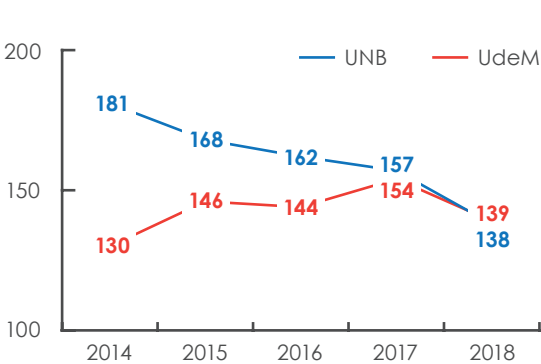


FIGURE 1 Number of BN Students Admitted

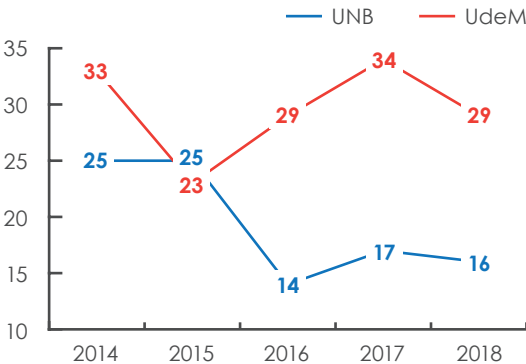


FIGURE 2 Number of Masters Students

NNANB collects information from the schools of nursing in New Brunswick to inform our vision for the future of nursing to the benefit of our citizens. This data also contributes to future fiscal

and nursing human resource planning for NANB and health stakeholders including the Government of New Brunswick.

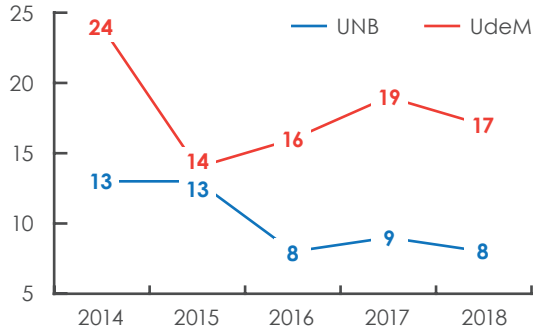


FIGURE 3 Number of NP Students

PRACTICE CALLS

Practice Consultation Calls

The Nurses Association of New Brunswick supports professional nursing practice by providing confidential consultation services to registered nurses (RNs) in all practice areas, and to the public. A *consultation* is an interaction to provide expert advice related to a professional practice issue, it can occur in person, over the phone or via email. Consultation service is offered on a wide variety of issues, such as:

- interpretation of NANB’s documents and government legislation (e.g.; Standards, Nurses Act),
- advice on ethical behaviors, issues of patient safety and appropriate action, conflict resolution, and the management of practice concerns.

All consultations are collected in a database which allows us to capture, analyze and respond to emerging trends and ensure that we provide consistent and evidence-informed support. We also use this information to guide our planning of future documents, FAQs, and presentations.

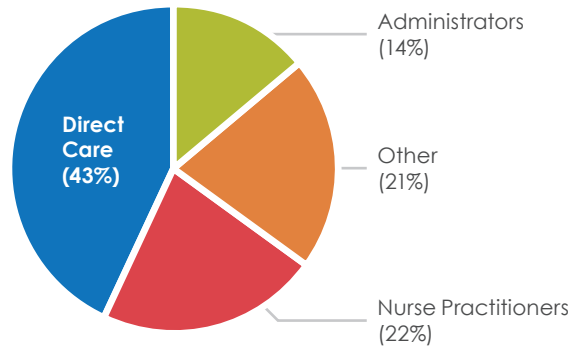


FIGURE 5 Type of RN Consulting

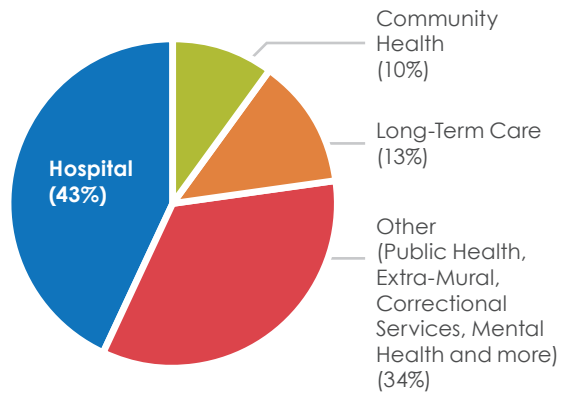


FIGURE 6 Practice Setting

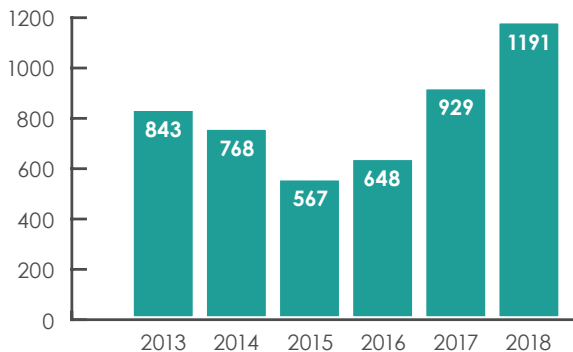


FIGURE 4 Total Consultations

Total Consultations

In 2018, NANB answered 1191 consultations compared to 929 in 2017 (see Figure 4).

The majority of consultations, 851, were provided to RNs. NANB also received several calls from the public, 96. Consultations to the public occurred on a variety of topics including: how to get an NP as a primary care provider, how to register as an RN, how to file a complaint with NANB, and the scope of nurse practitioner practice.

Of the RN consultations 369 were RNs providing direct care, 115 were administrators and 185 were nurse practitioners (NPs), and 182 were categorized as “other”, which includes nurse managers, educators, researchers and out of province nurses.

PRACTICE CALLS

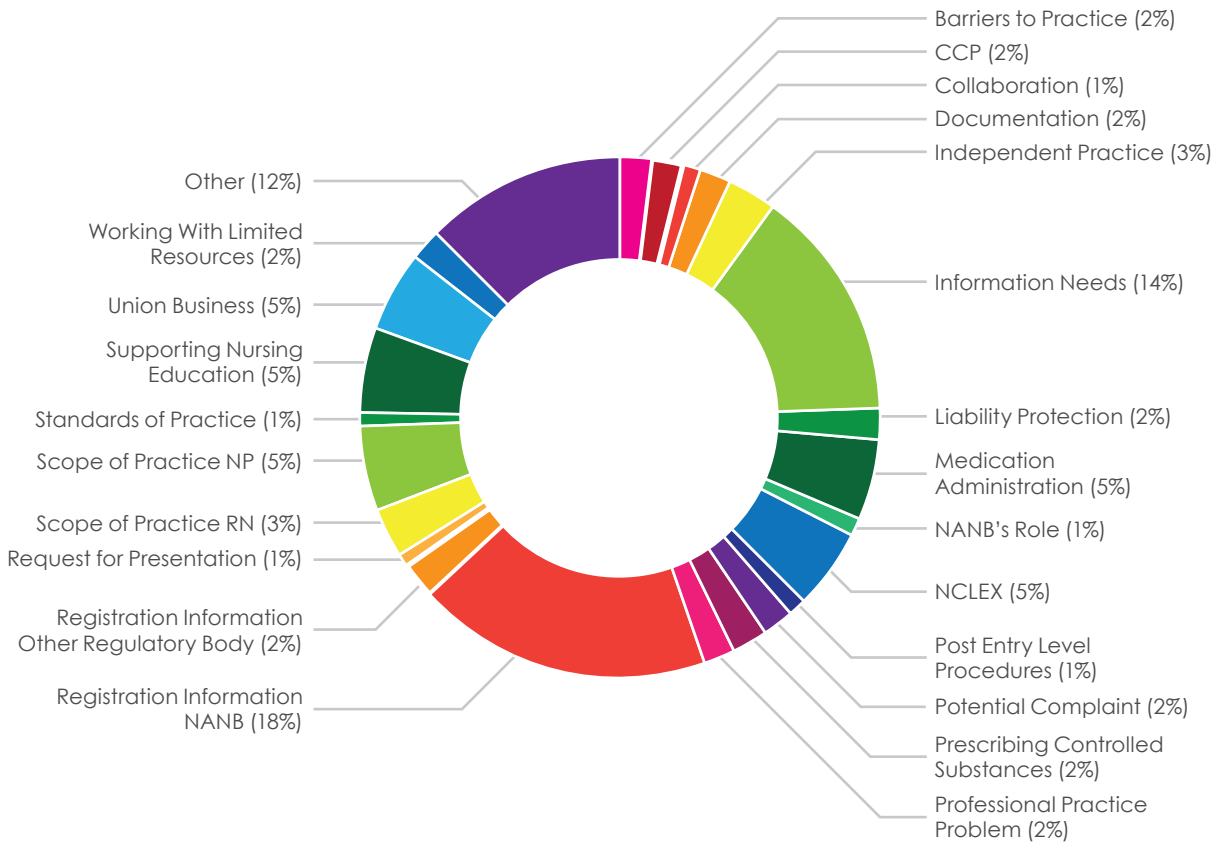


FIGURE 7 Consultation Calls (December 1, 2017–November 30, 2018)

Consultation Topics

Consultations occur on a wide variety of topics (see Figure 7), many related to NANB registration, NP scope of practice, RN scope of practice, medication administration, working in independent practice and the NCLEX. The consultation may result in the NANB consultant providing advice, reviewing existing NANB resources, referring to another organization, planning a follow up meeting, and or delivering a presentation. Member questions are important to us and help us to best support your practice and the provision of safe, competent and ethical care in the interest of the public.

PRESENTATIONS & DOCUMENTS



Presentations

In response to a consultation or by specific request, NANB staff delivered 29 presentations to 822 participants. Presentations can be requested through a consultation or the NANB website. NANB offers presentation on the following topics:

- *Working together: RNs and LPNs Practising Together*
- *Documentation: Why all this paperwork?*
- *Professionalism*
- *Working with Limited Resources: Strategies for RNs and NPs*
- *Cannabis: Implications for Nursing*
- *Standards of Practice: Live your Standards of Practice Every Day*
- *Transition to Practice: From Nursing Student to Regulated Professional*

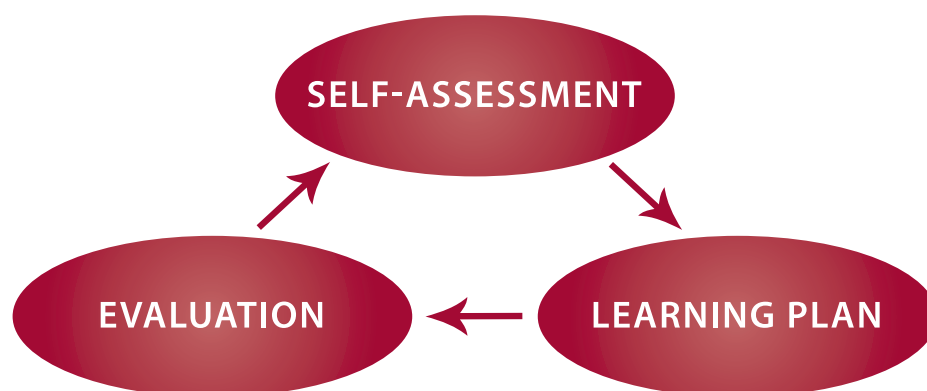
NANB Documents

NANB publishes documents to support nursing; many directly related to questions asked by nurses. In 2018, NANB produced a number of documents including:

- *Position Statement: Non-Medical Cannabis use*
- *Practice Guideline: Managing Registered Nurses with Significant Practice Problems*
- *Fact Sheet: Nurse Practitioners Prescribing Methadone*
- *FAQ: Are NPs Authorized to Prescribe Methadone in New Brunswick?*
- *FAQ: Non-medical Cannabis Use*
- *FAQ: Cannabis (Joint NANB and ANBLPN)*
- *FAQ: When Can Registered Nurses Administer Naloxone?*
- *FAQ: Use and Misuse of Professional Practice Title*
- *FAQ: What Is a Directive?*
- *FAQ: Duty to Report: When am I responsible to do so and how do I do it?*
- *FAQ: I'm a registered nurse/nurse practitioner practising in New Brunswick. How can I get Practice advice from NANB?*
- *FAQ: What do I need to know about camp nursing?*

All documents are available on the NANB website at nanb.nb.ca.

CONTINUING COMPETENCE PROGRAM (CCP)



**386 RNs,
13 NPs Audited**

**5% of RNs and 10% of
NPs Audited Yearly**

**Follow-up Required
with 10 Members**

Language	RN	NP
English	254	8
French	132	5
Area of Practice	RN	NP
Direct Care	281	11
Administration	28	0
Education	23	0
Research	1	0
Other	53	2
Employment Setting	RN	NP
Hospital	239	0
Community	59	10
Nursing Home	39	0
Educational Institution	11	0
Other	38	3

CCP Compliance and Audit

The Continue Competence Program (CCP) requires members to reflect on their practice through self-assessment, to complete a learning plan, and to evaluate the impact of the learning activities. Registered nurses and nurse practitioners must comply with CCP requirements to maintain their registration. All members answer a compulsory question on their annual registration renewal form to indicate if they have met the CCP requirements. An audit process is used to monitor members' compliance with the CCP.

LEGISLATED & STANDING COMMITTEES

Nurse Practitioner Therapeutics Committee

The Nurse Practitioner Therapeutics Committee (NPTC) is an advisory committee to the NANB Board of Directors. It consists of two nurse practitioners (NPs), two pharmacists, and two physicians (MD), appointed by their respective regulatory bodies. The Committee develops and reviews NP *Schedules for Ordering*, screening and diagnostic tests that may be ordered and interpreted; drugs that may be selected or prescribed; and forms of energy that may be ordered and the circumstances under which they may be ordered, by a nurse practitioner. The NPTC conducted three meetings in 2018. Meeting outcomes included: ministerial approval of NP prescribing of methadone for opioid and pain management; and for prescribing of cannabis. Both methadone and cannabis prescribing approval is based on NP continuing competency through completion of recommended education on these medications.

Committee members: Martha Vickers, NP (Chair); Janet Weber, NP; Christine Michaud, Pharmacist; Katrina Mulherin, Pharmacist; Naomi White, MD and Timothy Snell, MD.

Complaints Committee

The Complaints Committee reviews written complaints about the conduct of members and former members of the NANB in accordance with the *Nurses Act*. NANB staff receive many calls and emails regarding potential complaints during the course of a year, but not all of these concerns lead to an official complaint that engages the professional conduct review process under the *Nurses Act*.

COMPLAINTS 2018	TOTAL
New Complaints	17
Complaints Committee Meetings	19
Referred to Review Committee	9
Referred to Discipline Committee	6
Registration Suspended	10
Complaint Dismissed	4
Cases Carried Forward to 2019	4

TABLE 1 Complaints 2018

Committee members: Monique Mallet-Boucher (Chair), Angela Arsenault-Daigle, Renée Benoit-Valdron, Julie Boudreau, Marius Chiasson, Erin Corrigan, Denise Cyr-Laplante, Diana Dupont, Roland Losier, Albert Martin, Aline Saintonge, Jeannita Sonier and Edith Tribe.

Discipline and Review Committee

Under the *Nurses Act*, NANB is legally required to maintain a process for dealing with complaints against nurses which relate to professional conduct and fitness to practice. The Discipline and Review Committee consider complaints referred to them by the Complaints Committee of the Association. Health related problems which may contribute to unsafe nursing practice are considered by the Review Committee, while all other complaints are handled by the Discipline Committee.

Committee members: Odette Arseneau (Chair), Sharon Smyth Okana, Dorothy Arsenault, Sharon Benoit, Eric Chamberlain, Trevor Hamilton, Édith Côté Léger, Brandie McCormack, France Marquis, Heidi Mew, Ghislain Ouellet, Catherine Pelazar, Rhonda Reynolds, Jacqueline Savoie, Line Savoie, Marlene Sipprell, Nancy Sirois Walsh, Carolyne Steves, Louise Thibodeau, Nathaniel Wickett, Gérald Bourque, Charles Flewelling, Elisabeth Goguen, Marguerite Levesque, Gérald Pelletier and Édith Peters.

Nursing Education Advisory Committee

One way NANB ensures delivery of safe, competent and ethical nursing care to the public is by approving all entry-to practice education programs. The purpose of the approval process is to ensure that the baccalaureate, nurse practitioner and re-entry education programs meet Standards for Nursing Education in New Brunswick and entry-level competencies. The Nursing Education Advisory Committee (NEAC) advises the NANB Board of Directors regarding the development and revision of nursing education standards and makes recommendations following review of schools of nursing.

In 2018, the NEAC held five meetings. The business of these meetings included: reviewing interim reports from the Université de Moncton Baccalaureate Program Approval (2016); Université de Moncton Nurse Practitioner Program Approval (2015); University of New Brunswick Nurse Practitioner Program Approval (2016); and the Registered Nurse Professional Development Centre Bridging/Re-Entry Program Approval (2016).

LEGISLATED & STANDING COMMITTEES



The NEAC also revised the Committee terms of reference and the composition of the membership to strengthen the capacity of the Committee and its accountability to the public.

Committee members: Nancy Sheehan (acting Chair), Liette Andrée Landry (Chair October 2018-Aug 2019), Marissa Babin, Nicole Irving, Lisa Keirstead-Johnson, Raelyn Lagace, Lucie-Anne Landry, Linda Plourde, Angela Snyder and Loretta Waycott.

Resolution Committee

The Resolutions Committee received one resolution in March 2018, which was ruled out of order. Two resolutions were presented to the members at the Annual General Meeting and accepted by voting members.

The following Chaleur Chapter members served on the Resolutions Committee in 2018: Susan LeBlanc (Chair), Rachel Boudreau and Caroline Hachey.

MEMBERSHIP STATISTICS

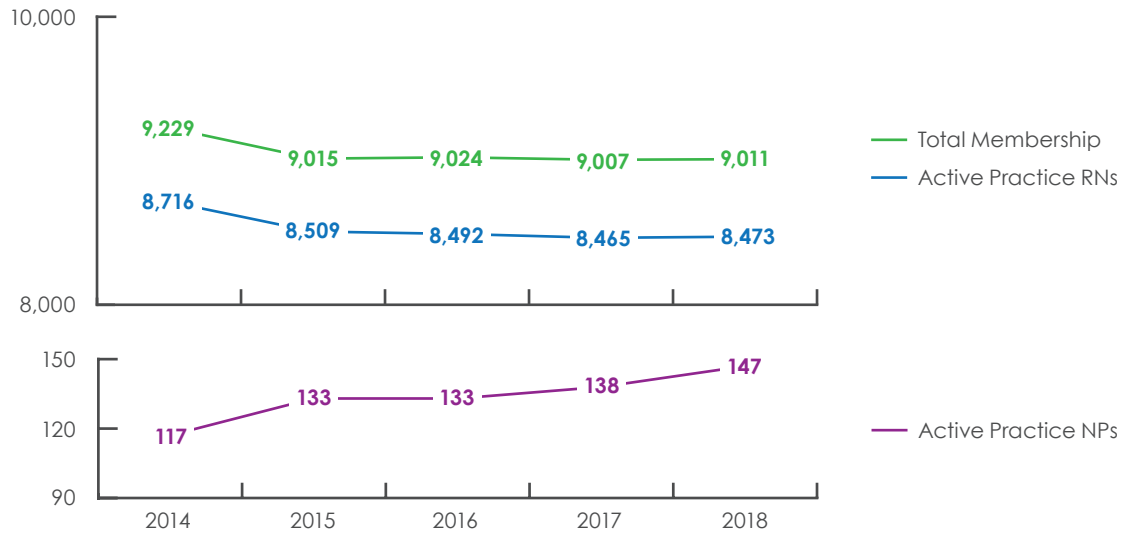


FIGURE 8 Active Practice RNs and NPs

Total Membership includes active practice RNs and NPs, non-practising members, and life members.

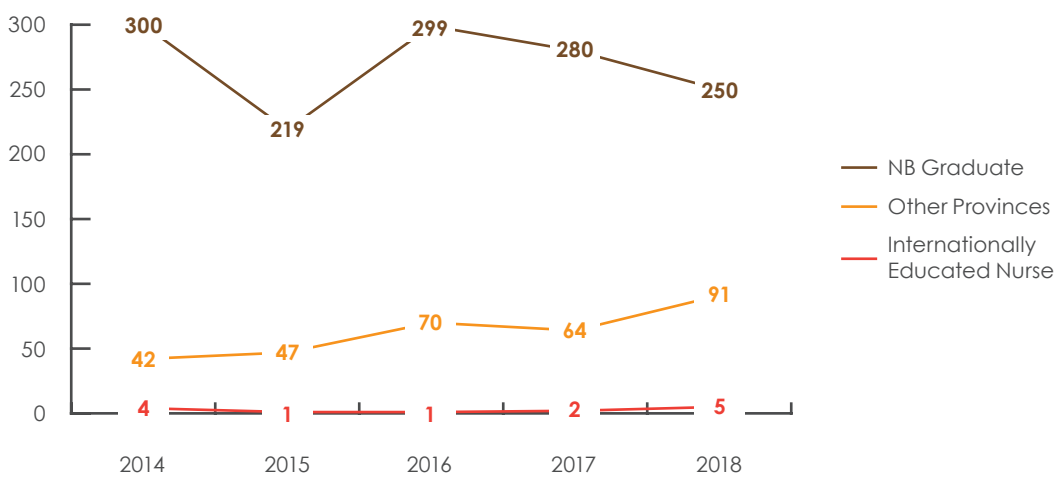


FIGURE 9 Number of New Registrants

MEMBERSHIP STATISTICS

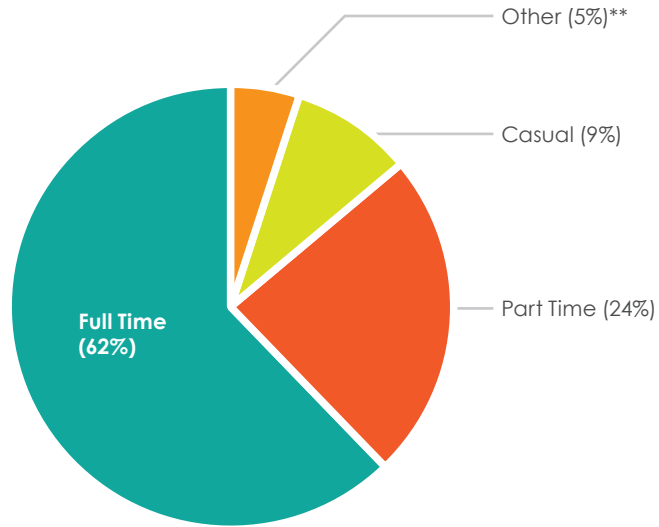


FIGURE 10 Distribution of Nurse Employment*

*Totals may not sum to 100% due to rounding. **Includes temporary, leave of absence and unknown.

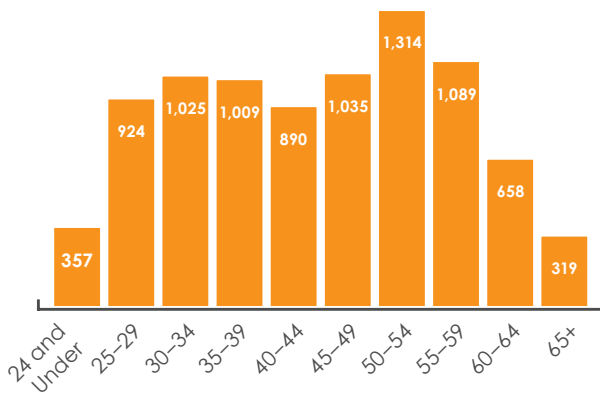


FIGURE 11 Age Distribution of Employed RNs & NPs

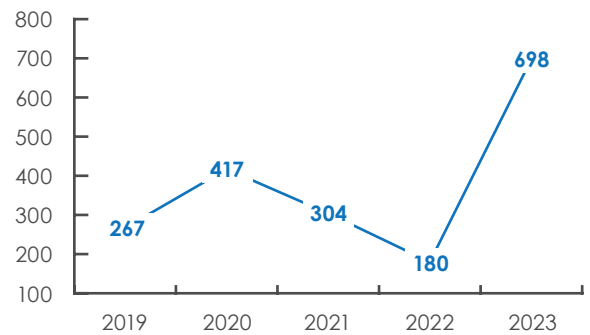


FIGURE 12 Planned Retirements 2019-23

MEMBERSHIP STATISTICS

Internationally Educated Nurse (IEN) Applicants

All applicants for registration must complete a nursing education program approved by NANB, or equivalent. NANB assesses internationally educated nurse's (IEN) education and training against the entry to practice standards in Canada.

If competency gaps are identified, IEN applicants are required to complete additional education and training in order to become eligible to write the national registration examination and become registered to practice in New Brunswick.

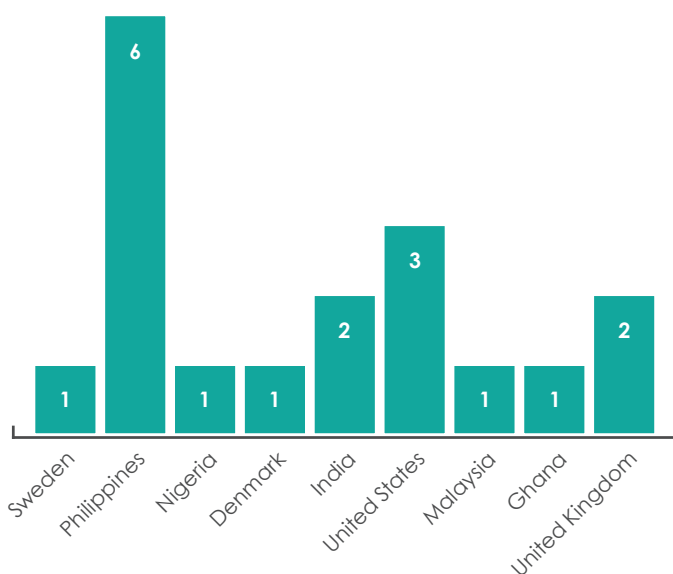


FIGURE 13 Internationally Educated Applicants by Country of Original Education

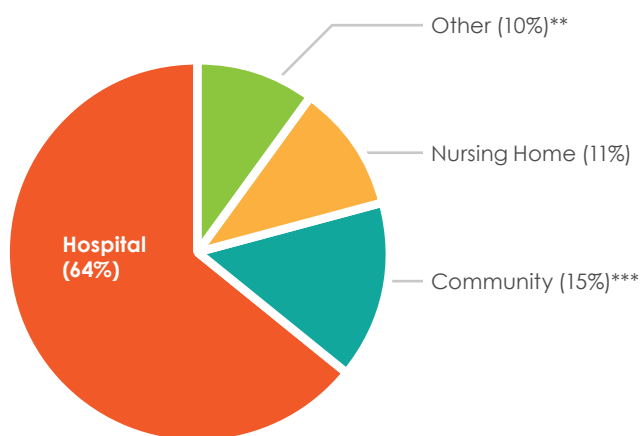


FIGURE 14 Place of Employment*

*Totals may not sum to 100% due to rounding. **Other includes physician offices, industry, educational institutions, self-employed, association, government, correctional facilities, addiction centres, armed forces. ***Community includes public health service, Extra-Mural Program (Medavie), health services centres, mental health clinics and community health centres.

MEMBERSHIP STATISTICS

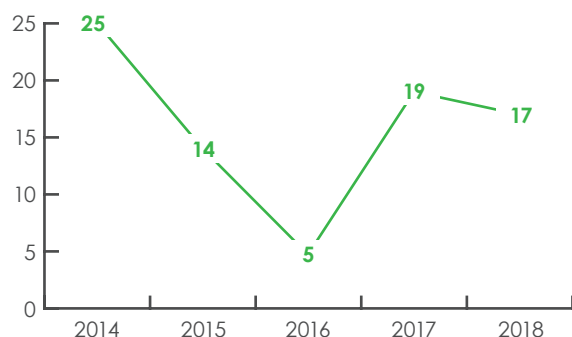


FIGURE 15 Number of Complaints Received By Year

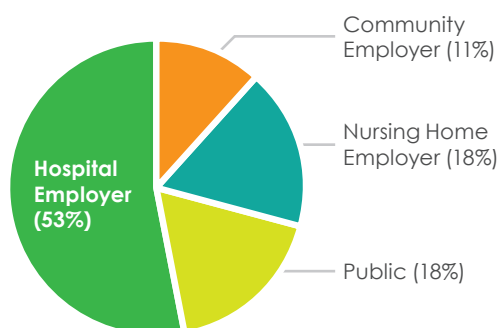


FIGURE 16 Source of Complaints

Conditional Registrations

In 2018, NANB staff monitored 16 members with conditional registrations as a result of complaints heard by the Discipline and Review Committees. Conditional registrations impose conditions and restrictions on a member's nursing practice in order to assure safe, competent care delivery. Conditions may include remedial education, performance assessments, health reports, random drug testing and payment of a specified amount. Conditional registrations are determined on a case-by-case basis and are typically in place for one to two years following the active return to nursing practice by the member. Any violation of the conditions placed on a registration requires automatic suspension of the member and a referral back to the review or discipline committees for further inquiry. NANB staff work with registrants and employers to ensure compliance.

*Some complaints fall into more than one category. **Incompetence:** Medication administration errors, substandard documentation, lack of knowledge, skills and judgment • **Professional Misconduct:** Theft, fraud, deceit, dishonesty, unethical behavior • **Conduct unbecoming a member:** Breach of privacy, breach of *Nurses Act*, criminal convictions, misuse of title, inappropriate conduct • **Fitness to Practice:** May relate to any cognitive, physical, psychological or emotional condition, or a dependence on alcohol or drugs, that may impair his or her ability to practise nursing.

Infringements (Unauthorized Practice)

In 2018, NANB staff was notified and dealt with 13 infringements from members, and five of these members were required to pay an unauthorized practice fee. Under the *Nurses Act*, it is illegal to practice nursing in New Brunswick without an active registration. If a member practices nursing without being registered, the nurse or nurse practitioner member is deemed to have infringed the *Act* and is fined. Any hours worked as not registered cannot be counted towards the renewal of a nursing license to practice.

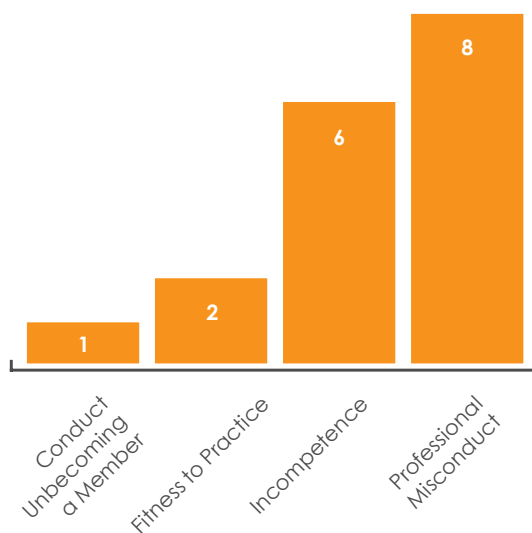


FIGURE 17 Nature of Complaints*

FINANCIAL POSITION

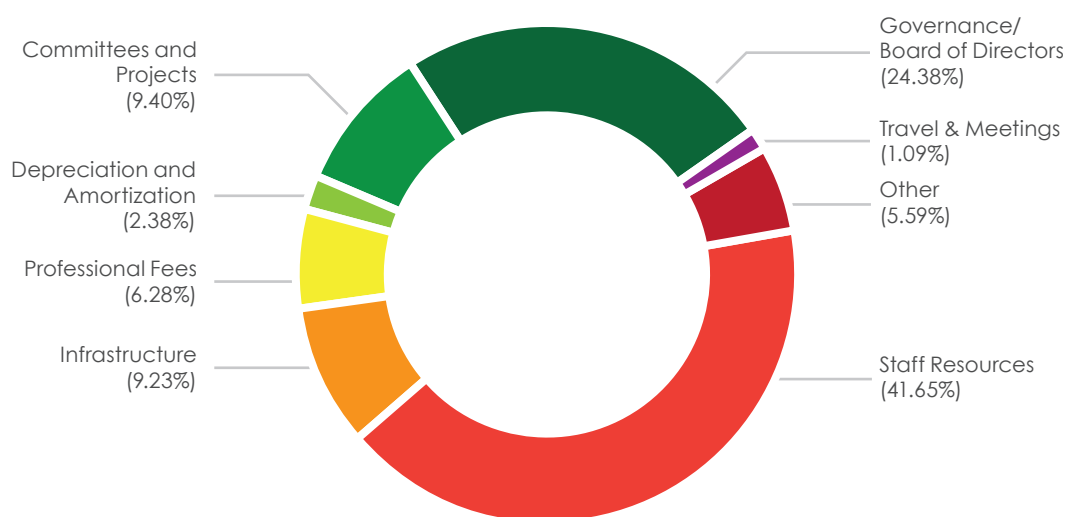


FIGURE 18 Expense Distribution 2018

FOR THE YEAR ENDED NOVEMBER 30, 2018, THE NANB SHOWED an operating surplus of \$531,968 compared to a projected surplus of \$3,440. Conservative revenue projections resulted in higher than anticipated membership fee revenue. Projected operating expenses were inline with actual costs resulting in an overall surplus. The operating surplus allowed for interfund transfers to both the Capital Fund and the Contingency Fund to continue to support long term financial planning and stability.

Operating expenses for 2018 remained consistent with previous years, including significant funds to support the NANB's membership with the Canadian Nurses Association, the Canadian Council of Registered Nurse Regulators, and the Canadian Nurse

Protective Society. Infrastructure and office costs were approximately 17% of operational expense, while membership support accounts for 58% of annual expenses.

The capital Association assets are valued at \$7.2 million, with \$2.2 million of capital assets. The NANB does not have any operational long term debt. All long and short term investments are held in secure principal protected financial instruments. The association follows the restricted fund method of accounting to allow for long term planning and protection of operational funds.

Future operational results are being managed to mitigate any financial risk related to membership decline, membership participation in CNA, CCRNR, and CNPS, and unforeseen expenses.

NURSES ASSOCIATION OF NEW BRUNSWICK

FINANCIAL STATEMENTS

NOVEMBER 30, 2018

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NICHOLSON & BEAUMONT
CHARTERED PROFESSIONAL ACCOUNTANTS

AUDITOR'S REPORT

To the Executive
Nurses Association of New Brunswick

We have audited the accompanying financial statements of Nurses Association of New Brunswick, which comprise the statement of financial position as at November 30, 2018 and the statements of operations, changes in net assets and cash flows for the year then ended and a summary of significant accounting policies and other explanatory information.

Management's responsibility for the financial statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian accounting standards for not-for-profit organizations, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Auditor's responsibility

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 comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

An audit involves performing procedures to obtain audit evidence about the amounts and disclosures in the financial statements. The procedures selected depend on the auditor's judgement, including the assessment of the risks of material misstatement of the financial statements, whether due to fraud or error. In making those risk assessments, the auditor considers internal control relevant to the entity's preparation and fair presentation of the financial statements in order to design audit procedures that are appropriate in the circumstances, but not for the purpose of expressing an opinion on the effectiveness of the entity's internal control. An audit also includes evaluating the appropriateness of accounting policies used and the reasonableness of accounting estimates made by management, as well as evaluating the overall presentation of the financial statements.

We believe that the audit evidence we have obtained is sufficient and appropriate to provide a basis for our audit opinion.

Opinion

In our opinion, these financial statements present fairly, in all material respects, the financial position of the Nurses Association of New Brunswick, as at November 30, 2018 and the results of its operations and its cash flows for the year ended November 30, 2018 in accordance with Canadian accounting standards for not-for-profit organizations

A handwritten signature in cursive script that reads "Nicholson & Beaumont".

Fredericton, NB
February 19, 2019

Chartered Professional Accountants

Nurses Association of New Brunswick
Statement of Changes in Fund Balance
As at November 30, 2018

	<u>Internally Restricted</u>				2017 Total
	<u>Employee Benefit Fund</u>	<u>Contingency Fund</u>	<u>Capital Fund</u>	<u>Total</u>	
			<u>Invested in Capital Assets</u>	<u>Unrestricted</u>	<u>2018 Total</u>
Balance, beginning of year	\$ -	\$ 1,188,938	\$ 327,532	\$ 1,516,470	\$ 3,910,189
Excess of revenue (expenses) for year	(21,286)	26,183	7,282	12,179	571,799
Interfund transfers (Note 5)	21,286	250,000	325,000	596,286	-
Purchase of capital assets	-	-	6,211	(6,211)	-
Balance, end of year	<u>\$ -</u>	<u>\$ 1,465,121</u>	<u>\$ 659,814</u>	<u>\$ 2,124,935</u>	<u>\$ 5,026,135</u>
			<u>\$ 2,227,393</u>	<u>\$ 673,807</u>	<u>\$ 4,481,988</u>

See accompanying notes to the financial statements

Nicholson & Beaumont
Chartered Professional Accountants

Nurses Association of New Brunswick
Statement of Operations
For the Year Ended November 30, 2018

	General Fund	Employee Benefit Fund	Contingency Fund	Capital Fund	Total 2018	Total 2017
Revenue						
Advertising and publication	\$ 6,640	\$ -	\$ -	\$ -	\$ 6,640	\$ 6,890
Annual meeting	196	-	-	-	196	991
CNA fees and exams	498,905	-	-	-	498,905	472,095
Investment income	40,498	2,453	26,183	7,282	76,416	58,651
Membership fees	3,532,252	-	-	-	3,532,252	3,509,956
NANB exam fees	1,400	-	-	-	1,400	1,100
Rental income	54,503	-	-	-	54,503	54,779
Other income	85,786	-	-	-	85,786	62,444
IEHP initiative	<u>160,671</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>160,671</u>	<u>212,500</u>
	<u>4,380,851</u>	<u>2,453</u>	<u>26,183</u>	<u>7,282</u>	<u>4,416,769</u>	<u>4,379,406</u>
Expenses						
Annual meeting	55,255	-	-	-	55,255	73,680
Awards	23,000	-	-	-	23,000	24,247
Chapter grants and funds	11,476	-	-	-	11,476	9,061
CNA board & biennium	-	-	-	-	-	-
CNA, CNPS, and CRNE fees	802,444	-	-	-	802,444	777,066
Committees, project and other activities	156,321	-	-	-	156,321	115,241
Liaison – membership/counterparts/ stakeholders/corporate	42,050	-	-	-	42,050	40,670
Employee wages and benefits (Note 6)	1,555,505	23,739	-	-	1,579,244	1,586,308
Information systems	13,820	-	-	-	13,820	18,275
Communications and public relations	143,667	-	-	-	143,667	103,501
Lease and bank charges	59,580	-	-	-	59,580	52,740
NANB board and executive	117,870	-	-	-	117,870	111,169
Office expenses	120,774	-	-	-	120,774	139,312
Personnel development	32,639	-	-	-	32,639	16,059
Premises expenses	163,036	-	-	-	163,036	163,253
Professional expenses	243,031	-	-	-	243,031	262,694
IEHP initiative	<u>216,215</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>216,215</u>	<u>212,500</u>
	<u>3,756,683</u>	<u>23,739</u>	<u>-</u>	<u>-</u>	<u>3,780,422</u>	<u>3,705,776</u>
Excess of revenue (expenses) before loss on disposal and amortization of capital assets	<u>624,168</u>	<u>(21,286)</u>	<u>26,183</u>	<u>7,282</u>	<u>636,347</u>	<u>673,630</u>
Loss on disposal of capital assets	<u>92,200</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>92,200</u>	<u>101,831</u>
Amortization of capital assets	<u>92,200</u>	<u>-</u>	<u>-</u>	<u>-</u>	<u>92,200</u>	<u>101,831</u>
Excess of revenue (expenses) for year	<u>\$ 531,968</u>	<u>\$ (21,286)</u>	<u>\$ 26,183</u>	<u>\$ 7,282</u>	<u>\$ 544,147</u>	<u>\$ 571,799</u>

See accompanying notes to the financial statements

Nicholson & Beaumont
Chartered Professional Accountants

**Nurses Association of New Brunswick
Statement of Cash Flows
For the Year Ended November 30, 2018**

	<u>2018</u>	<u>2017</u>
Cash flows from operating activities		
Excess of revenue for year	\$ 544,147	\$ 571,799
Add back non-cash items		
Accrued employee retirement/resignation benefits	23,739	14,223
Amortization of capital assets	92,200	101,831
Investment income reinvested	(24,224)	(14,858)
Changes in cash relating to operations		
Accounts receivable	179,398	(151,644)
Prepaid expenses	(9,365)	24,891
Accrued interest receivable	(7,067)	2,058
Accounts payable	(54,099)	(25,376)
Future revenue	<u>121,280</u>	<u>15,771</u>
	<u>866,009</u>	<u>538,695</u>
Cash flows from financing activities		
Retirement allowance/sick leave allowance paid	(54,013)	(130,094)
Cash flows from investing activities		
Transfer of long-term investments to current	1,201,830	792,431
Purchase of long-term investments	(3,817,300)	(4,652,194)
Purchase of capital assets	(6,211)	(6,838)
Disposal of long-term investments	<u>2,802,031</u>	<u>3,045,579</u>
	<u>180,350</u>	<u>(821,022)</u>
Net increase (decrease) in cash and investments	992,346	(412,421)
Cash resources, beginning of year	<u>1,087,213</u>	<u>1,499,634</u>
Cash resources, end of year	\$ 2,079,559	\$ 1,087,213
<u>Represented by</u>		
Cash	\$ 877,729	\$ 303,793
Bank indebtedness	-	(9,011)
Short term investments	<u>1,201,830</u>	<u>792,431</u>
	\$ <u>2,079,559</u>	\$ <u>1,087,213</u>

See accompanying notes to the financial statements

Nicholson & Beaumont
Chartered Professional Accountants

**Nurses Association of New Brunswick
Notes to the Financial Statements
For the Year Ended November 30, 2018**

1. Purpose of the Association

The Nurses Association of New Brunswick was incorporated under "An Act Respecting the Nurses Association of New Brunswick" in the Province of New Brunswick on June 20, 1984.

The Association is a self-governing body established to advance and maintain the standard of nursing in the Province of New Brunswick, for governing and regulating those offering nursing care, and for providing for the welfare of members of the public and the profession.

The Association is registered as a not-for-profit organization under the Income Tax Act, and as such, is exempt from income taxes.

2. Significant accounting policies

(a) Financial instruments

Measurement

The association initially, measures its financial assets and liabilities at the fair value, except for certain related party transactions that are measured at the carrying amount or exchange amount, as appropriate. Transaction costs are expensed when incurred.

The association subsequently measures all its financial assets and liabilities at cost or amortized cost.

The association's financial instruments consist of cash, short-term investments, accounts receivable, accrued interest receivable, investments, payables and accruals, and accrued employee retirement allowance benefit.

It is management's opinion that the association is not exposed to significant credit risk or currency risk from these financial instruments. The fair value of these financial instruments approximate their carrying value unless otherwise noted.

(b) Capital assets and amortization

Capital assets are recorded at cost less accumulated amortization. Amortization is recorded annually on a straight-line basis as follows:

Paving and fencing	5%
Building	2.5%
Computer and photocopy equipment	33.3%
Office furniture and equipment	6.67%

(c) Fund accounting and revenue recognition

The Association follows the restricted fund method of accounting and revenues are recorded when earned.

Unrestricted revenues and expenses relating to administration and program activities are reported in the General Fund.

Revenue and expenses relating to employee retirement/resignation are reported in the Employee Benefit Fund. This fund is being maintained at an amount equal to management's best estimate of its future obligation to its employees at November 30, 2018 in accordance with its personnel policies.

**Nurses Association of New Brunswick
Notes to the Financial Statements
For the Year Ended November 30, 2018**

Note 2 (c) Continued

Revenue and expenses relating to costs incurred in carrying out Nurses Association of New Brunswick's mandate in the discipline function area, which are unforeseen and above the annual budgeted amount, are reported in the Contingency Fund.

(d) Contributed services

No amount has been included in these financial statements for contributed services.

(e) Use of estimates

The preparation of the financial statements in accordance with generally accepted accounting principles requires Management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenues and expenses during the reported period. Actual results could differ from Management's best estimates, as additional information becomes available in the future.

(f) Risk Management Policy

The organization is exposed to various risks through its financial instruments. The following analysis provides a measure of the risks at November 30, 2018.

Market risk

The organization is exposed to interest rate risk on its fixed rate financial instruments. Fixed interest instruments subject the association to a fair value risk.

Liquidity risk

The organization considers that it has sufficient resources to ensure funds are available to meet its current and long term financial needs, at a reasonable cost.

Credit risk

The organization's credit risk is mainly due to its account receivable. The organization believes that its accounts receivable credit risk is limited because:

- In the last three fiscal years the organization has not recognized an expense for doubtful accounts.

(g) Revenue recognition

The organization recognizes revenue in the period that it is earned.

**Nurses Association of New Brunswick
Notes to the Financial Statements
For the Year Ended November 30, 2018**

3. Investments

Investments, which are recorded at fair value, consist of the following:

General Fund

Investments - current

Seven GIC's with interest ranging from 1.45% to 2.45%, paid annually. \$ 700,000

Investments - long term

Seven GIC's all due in 2020 with interest ranging from 2.66% to 2.93%, paid annually. \$ 700,000

RBC Investment Savings Account Series A (2010) 3,014,694

\$ 3,714,694

Cost of the above investments approximate their fair market value.

Employee Benefit Fund

Investments - current

GIC General Bank of CDA, due July 18, 2019 with interest at 1.85%, payable at maturity. \$ 90,000

GIC SBI Canada Bank due, July 18, 2019 with interest at 1.58%, payable at maturity. 42,560

\$ 132,560

Investments - long term

RBC Investment Savings Account Series A (2010) \$ 8,886

Cost of the above investments approximate their fair market value.

Capital Fund

Investment - current

GIC CDN Western Bank, due November 30, 2019 with interest at 2.03%, paid at maturity. \$ 63,270

Investment - long-term

GIC Manulife Bank CDA, due August 25, 2020 with interest at 1.8%, paid annually. \$ 50,000

GIC Manulife Bank CDA, due August 25, 2021 with interest at 2%, paid annually. 50,000

GIC Bank of Montreal, due October 6, 2020 with interest at 2.1%, paid at maturity. 98,903

GIC CDN Western Trust, due November 30, 2022 with interest at 2.72%, paid at maturity. 63,270

\$ 262,173

Cost of the above investment approximate their fair market value.

**Nurses Association of New Brunswick
Notes to the Financial Statements
For the Year Ended November 30, 2018**

Note #3. Continued

Contingency Fund

Investment – current

GIC Laurentian Bank, due March 25, 2019 with interest at 1.85% at 1.85%, paid annually.	78,000
GIC LBC Trust, due March 25, 2019 with interest at 1.85%, paid annually.	78,000
GIC Equitable Bank, due February 12, 2019, with interest at 2.21%, paid annually.	100,000
GIC SBI Canada Bank, due February 12, 2019, with interest at 2.1%, paid annually.	<u>50,000</u>
	\$ <u>306,000</u>

Investment - long-term

GIC ICICI Bank Canada, due July 13, 2020 with interest at 1.8%, paid annually.	17,954
GIC Canadian Tire Bank, due October 26, 2021, with interest at 1.85%, paid annually.	100,000
GIC Peoples Trust, due October 26, 2021, with interest at 1.8%, paid annually.	55,000
GIC HSBC Bank Canada, due October 26, 2021, with interest at 1.75%, paid annually.	52,300
GIC HSBC Bank Canada, due August 25, 2020 with interest at 1.4%, paid annually.	45,000
GIC B2B Bank, due August 27, 2021 with interest at 2.45%, paid annually.	100,000
GIC Bank of Nova Scotia, due August 27, 2022 with interest at 1.8%, paid annually.	130,000
GIC Homequity Bank , due August 25, 2022 with interest at 2.5%, paid annually.	75,000
GIC ICICI Bank of Canada , due October 27, 2022 with interest at 2.72%, paid annually.	75,000
GIC Peoples Trust, due October 27, 2022 with interest at 2.8%, paid annually.	35,000
GIC Royal Bank of Canada, due October 26, 2023 with interest at 3.25%, Paid annually.	103,486
GIC Bank of Nova Scotia, due October 26, 2023 with interest at 3.25%, Paid annually.	<u>103,000</u>
	\$ <u>891,740</u>

Cost of the above investment approximate their fair market value.

**Nurses Association of New Brunswick
Notes to the Financial Statements
For the Year Ended November 30, 2018**

4. Capital Assets

	<u>Cost</u>	<u>Accumulated Amortization</u>	<u>2018 Net</u>	<u>2017 Net</u>
Land	\$ 301,893	\$ -	\$ 301,893	\$ 301,893
Paving and fencing	18,680	15,432	3,248	4,182
Building	3,062,695	1,242,376	1,820,319	1,896,887
Computer and photocopy equipment	124,549	119,324	5,225	4,984
Office furniture and equipment	<u>269,257</u>	<u>172,549</u>	<u>96,708</u>	<u>105,437</u>
	<u>\$ 3,777,074</u>	<u>\$ 1,549,680</u>	<u>\$ 2,227,393</u>	<u>\$ 2,313,383</u>

5. Interfund transfers and internally restricted fund balances

On November 30, 2018, the Employee Benefit Fund owed the General Fund \$22,063, which is payable on demand without interest.

On November 30, 2018, the General Fund owed the Capital Fund \$200,000, which is payable on demand without interest.

6. Registered retirement savings plan

During the 2018 year, as required by the Association's personnel policies, \$113,824 (2017 - \$112,065) was contributed to employees' individual registered retirement savings plans.

7. Accounts payable

Included in accounts payable is \$178,850 (2017 - \$159,079) of government remittances payable.

SUPPORTING NURSES

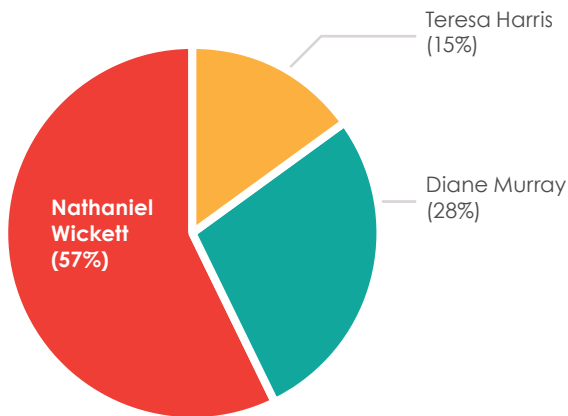


FIGURE 19 Election Results

Region 1 (Moncton and area)

Acclaimed

- Joseph Gallant

Region 3 (Fredericton and Upper River Valley)

Contested

- Teresa Harris
- Diane Murray
- Nathaniel Wickett

Region 5 (Campbellton and Restigouche)

Acclaimed

- Laura Gould

Region 7 (Miramichi area)

Acclaimed

- Deborah Walls

Board of Directors: Election

An online voting process using a third-party provider, Intelivote Systems Inc. was used to conduct the 2018 Election.

Media

NANB participated in a number of media events ranging in topics including: entry-to-practice exam (NCLEX-RN); nursing shortage, nurse practitioners and public access to care. NANB social media platforms include Facebook and Twitter. Social media provided an opportunity to inform members and the public on the legalization of Cannabis, as well as the national Opioid crisis and how they impact nursing practice. Additionally, NANB shared information on the nursing shortage, nurse practitioners and access to care, meetings with Ministers of both provincial and federal governments and other partners and stakeholders.

National Nursing Week 2018 (NNW)

NANB invited nurse leaders across the province to “raise the NANB flag” with their local municipalities as well as engaged members in a Facebook competition to demonstrate #YESThisIsNursing,

which led to the creation of NANB’s unique Nursing Week poster distributed to nursing workplaces. Nursing week advertisements and editorials were also published in special nursing week inserts through the daily provincial newspapers.

Staff Changes

NANB Board and staff extended congratulations to Dawn Torpe, Nursing Consultant, on her retirement, April 27, 2018 after five years of service.

In May, NANB welcomed two staff members to the team: Nicole Croussette, RN Nurse Consultant and Stéphanie Saulnier, Administrative Assistant: Registration Support.

SUPPORTING NURSES

Compassion Fatigue Workshop

In 2018, the Nurses Association of New Brunswick and New Brunswick Nurses Union provided Compassion Fatigue Workshops in Saint John, Moncton and Edmundston. Approximately 200 nurses attended the sessions, facilitated by presenter Stéphanie Maillet of the Université de Moncton. Ms. Maillet lead the workshops with a focus on providing participants with a better understanding of: contributing factors; signs and symptoms; as well as tools to prevent and manage compassion fatigue.



Supporting Nurse Leaders in Healthcare: The Future Looks Bright

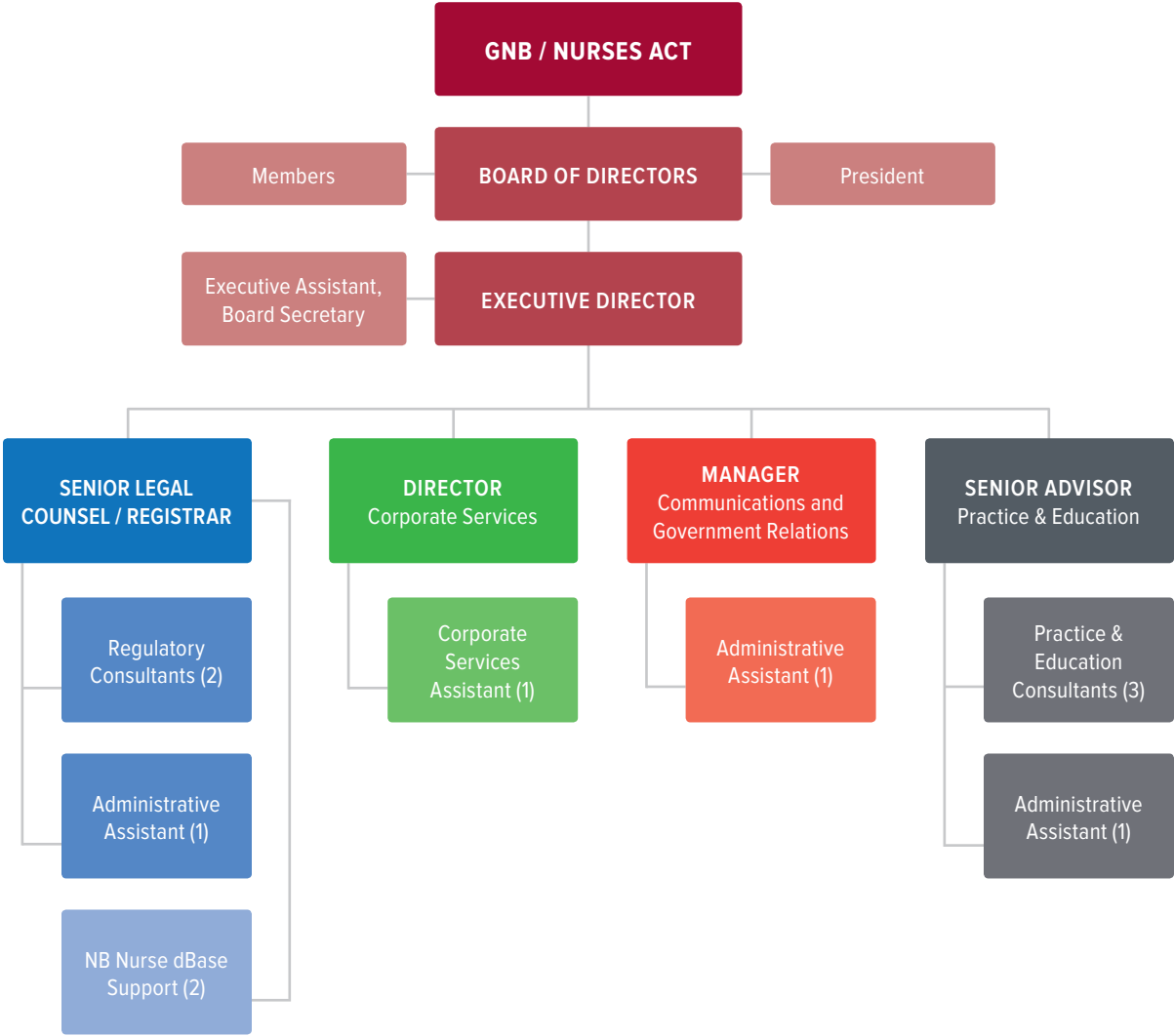
NANB hosted two workshops and a stakeholder roundtable highlighting global, national and regional health system and nursing trends in September 2018. The workshop was facilitated by Michael Villeneuve, CEO of the Canadian Nurses Association (CNA), joined by nurse regulators from Nova Scotia and Prince Edward Island. New Brunswick provincial nurse leaders participated in an open forum with NP, RN and LPN attendees.

Joint NANB/NBNU Provincial Election Campaign

NANB partnered with NBNU to develop an election campaign, Nursing Matters. The campaign highlighted five (5) areas of priority in health for NB residents including: access to primary health care; long-term care; mental health and addictions; Pharmacare; and nursing human resources. Both organizations met with the leaders of the five political parties to discuss these priorities and the role nurses enact daily to continually improve the health of New Brunswickers.



ORGANIZATIONAL STRUCTURE



BOARD OF DIRECTORS 2017–18



Region Directors

- Karen Frenette, RN, President
- Maureen Wallace, RN, President-Elect

- Joseph Gallant, RN, Region 1
- Rosanne Thorne, RN, Region 2
- Nathan Wickett, RN, Region 3
- Vicky Doiron, RN, Region 4
- Laura Gould, NP Region 5
- Anne Marie Lavigne, RN, Region 6
- Debbie Walls, RN, Region 7

Public Directors

- Joanne Sonier
- Pauline Banville-Pérusse
- Vacant

PRESIDENT & EXECUTIVE DIRECTOR'S MESSAGE



NANB, LIKE MOST OTHER ORGANIZATIONS OPERATING IN TODAY'S climate, is no stranger to change. As the world of health professional regulation evolves around the world, NANB must respond and evolve as well in order to continually remain relevant, effective and ensure legislated responsibilities are accomplished.

In 2018, NANB's Board of Directors and staff engaged in work that will better support nurses in the provision of safe, competent care, and assure the public of a certain standard of nursing care. A review of nursing practice standards was completed; if you haven't completed your own review of this important work, please take the time to review and reflect (www.nanb.nb.ca/media/resource/NANB2019-RNPracticeStandards-E-web.pdf). The national project on Entry Level Competencies was also completed in early 2018 and will be required to implement into nursing program curriculums by September 2020. NANB staff are currently engaged in presenting and discussing the new format and content with stakeholders in New Brunswick.

A Provincial Nursing Advisory Committee continued work on the required Continuing Competency Program for nurses. Nurses registering for the 2020 practice year will complete new online requirements for continuing competency, and in 2021, all nurses applying for registration in New Brunswick will be required to complete the initial learning module of a NB nursing continuing competency program.

NANB also continued to work toward a resolution on the

Entry to Practice Exam (NCLEX) file. A special update on this subject was prepared for members attending the 2018 Annual General meeting and was later posted on NANB's website.

In 2018, nurses renewing registration were asked to provide information concerning their potential planned retirement date(s). Results are provided on page 16 of this report, and although the numbers may vary due to health issues, financial issues, etc., the retirements projected for 2023 and afterward are propelling action on the Nursing Resource Strategy (NRS). The NRS is led by Department of Health and Post-Secondary Education Training & Labour. Participants include employers, educators, regulatory bodies, senior government officials, and representatives from Social Development. This is a priority file for all of us; a great deal of courage, innovation and collaboration is required to enhance our shrinking nursing workforce.

Operationally, NANB is venturing on a journey, but one that is similar to other nursing regulatory bodies across Canada. A Governance review commenced in 2017, with an emerging framework of governance that will support best practice and strong decision-making into the future. As 2018 closes, NANB continues to look forward to cross-jurisdictional licensing, utilization of technology versus Chapters for nursing support and engagement, and commencement of the scheduled review on NB nursing education standards.



Karen Frenette, RN, *President*
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Laurie Janes, *Executive Director*
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Nurses Association
OF NEW BRUNSWICK