
College of Registered Nurses of Nova Scotia

FRPA Review Report

Province of Nova Scotia



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Background of the Regulatory Body

The Role of the Registered Nurse and Nurse Practitioner

Registered nurses (RNs) are self-regulated professionals who independently apply specialized and evidence-based nursing knowledge, skills and judgment when providing care to individuals of all ages, families, groups, populations and communities. RNs manage and coordinate care, evaluate health outcomes, educate, counsel, and advocate for individual clients to assist them in meeting their health goals. RNs also advocate for broad health system changes to better meet the health needs of the population as a whole. They develop and lead health promotion programs, develop broad health policies and participate in and/or conduct research to improve nursing practice and advance nursing knowledge.

The provision of nursing services involves a variety of roles for RNs, including direct care provider, educator, consultant, administrator, and researcher. RNs practise in a variety of settings such as hospitals, nursing homes, clinics, communities, government, business and educational settings.

Nurse practitioners (NPs) are RNs with advanced nursing knowledge, skills and education; enabling them to provide leadership in the areas of health promotion, health management, and illness and injury prevention. NPs work closely with clients, families and other health professionals to address complex health needs and manage acute and chronic illness within a holistic model of care. They engage communities in the development, implementation and evaluation of health programs and health public policy.

NPs have the knowledge and skill to diagnose acute and chronic disease and illness, order and interpret necessary screening and diagnostic tests, prescribe and adjust medications, counsel clients on treatment options, perform a variety of invasive and non-invasive procedures and make referrals to other healthcare providers, including specialists, and community agencies. NPs work in a collaborative practice model of care with physicians and other health professionals. NPs manage the delivery of quality health care to families and people of all ages in a variety of settings, including family practice settings, health centres, hospitals, and specialty clinics.

Registered Nurses Act

Under provincial legislation (Registered Nurses Act or RN Act) the College of Registered Nurses of Nova Scotia (the College) is responsible to serve and protect the public interest; preserve the integrity of the nursing profession and maintain confidence in the ability of the nursing profession to regulate itself. The College achieves this mandate by promoting good practice, preventing poor practice, and intervening when practice is unacceptable. More specifically, the College' core regulatory functions are

- setting standards and approving the educational programs required to enter the nursing profession as RNs or NPs including the establishment of entry-level competencies for RN and NP practice

- issuing nursing registration¹ and licensure² to qualified applicants investigating all complaints related to RN and NP practice, and taking appropriate action
- developing, approving and promoting the standards of practice for RNs, NP standards of practice and a code of ethics that RNs and NPs must meet in their day-to-day practice to deliver safe, competent, compassionate and ethical nursing care
- promoting and enhancing the continuing competence of RNs and NPs (includes the College's Continuing Competence Program as well as practice consultations and education sessions to assist RNs and NPs in providing nursing services)

Protected Titles

The RN and NP occupation is regulated in Nova Scotia by the College. Registration and licensure with the College attests that the holder has met legislative requirements for the occupation as set out on the RN Act and RN Regulations.

No person can

1. engage in the practice of nursing or the practice of a nurse practitioner; or
2. call themselves “Registered Nurse”, “Nurse”³, or “nurse”³ or the abbreviation “R.N.”, “RN”, or “Reg.N”, "nurse practitioner", "N.P." or "NP", or any derivation or abbreviation of these terms.

unless they are registered and hold the applicable licence with the College.

This requirement is outlined in the RN Act in Sections 20(3), 60 (1) and 60(2) as well as Section 11(a) of the RN Regulations.

Labour Market Outlook

Trends in RN and NP Positions in Nova Scotia

RN shortages currently exist in some areas of the province, particularly in critical care units and rural areas. The College, along with other stakeholders including the Canadian Nurses Association⁴, Nurses Unions and large employers, continue to warn of the aging nursing

¹ Registration means the applicant has met all the requirements in accordance with the RN Act and Regulations for registration at the time of the assessment and therefore the applicant is eligible to register with the College but cannot engage in the “practice of nursing” as defined in the RN Act (2006).

² Licensure means the College has issued a licence allowing an individual registered with the College to engage in the “practice of nursing” as defined in the RN Act (2006). The registered nurse is placed in one of the following ten licensing rosters in accordance with the RN Act (2006) and Regulations (2009): active-practising, active-practising with conditions and/or restrictions; transitional with conditions and/or restrictions; temporary; temporary with conditions and/or restrictions; nurse practitioner; nurse practitioner with conditions and/or restrictions, temporary (nurse practitioner), and temporary (nurse practitioner) with conditions and/or restrictions.

³ The only exception is that licenced practical nurses holding a current license with the College of Licensed Practical Nurses of Nova Scotia may also use the term “Nurse”, or “nurse”.

⁴ Canadian Nurses Association (2009). *Tested solutions for eliminating Canada's registered nurse shortage*. Retrieved from website July 16, 2013: http://www2.cna-aiic.ca/cna/documents/pdf/publications/RN_Highlights_e.pdf.

population and an impending national nursing shortage affecting all areas of health care. When the shortage happens all of the country will be vying to recruit the same pool of nurses, which means that smaller provinces, such as Nova Scotia, may experience a more exaggerated shortage.

Future positions for RNs and NPs in Nova Scotia will be impacted by the following:

1. Aging population: In 2011, the percentage of the population aged 65 and over in Nova Scotia was 16.6%, compared with a national percentage of 14.8%⁵. An aging population should create demand for RNs and NPs. For example, recent efforts to increase the number of continuing care facilities for the aging population in Nova Scotia has increased demand for RNs.
2. Replacement needs: Since 2008, the proportion of RNs under the age of 50 has decreased by 1.5 per cent, while the proportion over 50 had increased by 14.9 per cent. Approximately 28% (2885/10171) of College members in the 2012 licensure year were over the age of 55, making these members eligible to retire in the next 10 years. In 2012 the three Nova Scotia schools of nursing graduated 306 nursing students. Although the Department of Health and Wellness has continued to add entry-level nursing education seats, retention of these new graduates is an issue due to the economic climate and fewer full time positions available. In Nova Scotia, regular full-time positions for new graduates decreased from 56.7% (127) in 2011 to 44.3% (101) in 2012. Casual employees who worked full-time hours increased from 10.3% (23) in 2011 to 21.9% (48) in 2012⁶.
3. Expanding health care fields and changes in care delivery models.

For all of the above reasons, Nova Scotia employers may become increasingly reliant on recruitment of internationally educated nurses⁷ (IEN) and domestic applicants from the rest of Canada to fill their employment needs. Therefore it is important that the College's registration and licensure processes are transparent, objective, impartial and procedurally fair.

⁵ Statistics Canada (2013). *Focus on geography series: 2011 Census*. Retrieved from website July 16, 2013: <https://www12.statcan.gc.ca/census-recensement/2011/as-sa/fogs-spg/Facts-pr-eng.cfm?Lang=eng&GK=PR&GC=12>.

⁶ Statistics are available on the College's website at: <http://www.crnns.ca/documents/Registration%20Statistics/2013-RPT-REG-AnnualReportStats.pdf>.

⁷ An internationally educated nurse (IEN) is a person who graduated from a nursing program taught in a country outside of Canada.

About the College

Staffing

The College currently employs twenty-seven staff, nine of whom are RNs. We are in the process of hiring another RN to replace a recent retirement. There are four departments at the College

1. Executive Office (three staff members, one of whom is both an RN and the Executive Director)
2. Registration Services and Professional Conduct (nine staff members, three are RNs)
3. Policy, Practice and Legislation Services (seven staff members, five are RNs and one of whom is also an NP)
4. Corporate Services, including information technology, finance and communication (eight staff members, none are RNs)

Registration Practices

Access to Registration Information

Domestic and International Applicants

The College provides access to registration information through the internet via their website www.crns.ca and through

- e-mail: most correspondence with potential applicants is conducted by e-mail
- hard copy: appropriate application information are sent to applicants upon request
- telephone: following the telephone discussion information is sent via e-mail wherever possible
- face-to-face meetings: during these meetings application requirements are reviewed and printed information is provided to applicants as needed

International Applicants

In addition to the communication strategies listed above, IENs who have never been registered in any Canadian jurisdiction are provided an electronic file

- describing the application process
- providing information related to community partners such as the Immigrant Settlement & Integration Services (ISIS) and the Registered Nurses Professional Development Centre (RN-PDC)
- containing the College's Standards of Practice for Registered Nurses

International applicants are encouraged to begin the application process while they are outside Canada, when possible. This is because some documents are easier to obtain while the applicant is still overseas.

International applicants can track the receipt of all application documents via the Application Status Search available on the College's website.

Steps in the Registration Process

The College has a comprehensive section of their website (<http://www.crnns.ca/default.asp?mn=414.1116.1128>) related to the steps in the registration process, depending on what you want to do. It allows the user to navigate through the various options.

Number of Applications Started in 2012

Table 1 Applicants from Outside of Nova Scotia but Within Canada

Category of applicant	Number / Canadian Province	Disposition at the end of 2012
Nurses holding registration in another Canadian jurisdiction	18 from Alberta 5 from British Columbia 2 from Manitoba 37 from Ontario 3 from Quebec 43 from New Brunswick 13 from Prince Edward Island 17 from Newfoundland and Labrador Total 158	136 accepted 19 still in process 3 withdrew
New graduate Nurse Practitioners not holding licensure in another Canadian jurisdiction	6 from Alberta	All accepted
Nurse practitioner holding registration/licensure in another Canadian jurisdiction	1 from Alberta 2 from Ontario 4 from New Brunswick	5 accepted 1 still in progress 1 withdrew

Table 2: Internationally Educated Nurse Applicants who have Never Been Registered in Another Canadian Jurisdiction in 2012

Country	Number of applicants to CRNNS	Disposition at the end of 2012
United Kingdom	14	1 accepted 1 rejected 2 withdrew The remainder were in process; either waiting documents to arrive at the College (58% [28/48]) or waiting to complete a competence assessment and/or bridging education at the Registered Nurses Professional Development Centre in Halifax, NS (42% [20/48]).
United States of America	11	
Philippines	8	
Israel	4	
India	3	
Nigeria	3	
Jamaica	2	
Iran	2	
Ghana	1	
Japan	1	
Korea	1	
Northern Ireland	1	
South Africa	1	
Total	52	

One international NP from the US withdrew after being accepted for NP licensure.

Number of Applications Completed in 2012

Every year the College receives applications from individuals seeking registration and licensure for the first time. These include new graduates from a nursing program or NP program, RNs and NPs already registered somewhere else in Canada or IENs who have never been registered in another Canadian jurisdiction.

Table 3: Number of Completed Applications Received in 2012 and their Disposition

Disposition of Completed Applications*	Number
Accepted	435 (93.3%)
In Process at the End of 2012	30 (6.4%)
Internationally Educated Nurses who were never registered in another Canadian jurisdiction	20 (67%)
RNs already registered in another Canadian jurisdiction	10 (33%)
Withdrew	1 (0.2%)
Total Completed Applications Received	466

*Note: some of these applications may have been initiated in a previous year and only became complete in 2012.

Types of Application Requests Received

Registration Services receives applications for the below requests. Each request has one or more application documents associated with it. All forms are available in Appendix B, on the College's website and can be sent to the applicant or member via email or regular mail upon request:

1. New graduates from a Nova Scotia nursing education program who wish to
 - a. write the Canadian Registered Nurse Exam (CRNE)
 - b. apply for a temporary licence to engage in the practice of nursing while waiting to write the CRNE or awaiting the CRNE results (optional)
 - c. apply for registration and initial licensure once they have passed the CRNE
2. New graduates from a Canadian Program outside of Nova Scotia who wish to
 - a. apply for a temporary licence to engage in the practice of nursing while waiting to write the CRNE or awaiting the CRNE results (optional)
 - b. apply for registration and initial licensure once they have passed the CRNE and received registration in the jurisdiction where they completed their program
3. Internationally Educated nurses who have never been registered in another Canadian jurisdictions who wish to
 - a. write the Canadian Registered Nurse Exam (CRNE)
 - b. apply for a temporary licence to engage in the practice of nursing while waiting to write the CRNE or awaiting the CRNE results (optional)
 - c. apply for registration and initial licensure once they have passed the CRNE
4. New Graduates from a Nova Scotia Nurse Practitioner (NP) program who wish to
 - a. write the applicable NP exam
 - b. apply for a temporary licence to engage in the practice of a nurse practitioner while waiting to write the NP exam or awaiting the NP Exam results (optional)
 - c. apply for initial licensure once they have passed the NP Exam
5. International nurse practitioners who wish to do all six items listed in #3 and #4
6. New Graduates from a Canadian Nurse Practitioner Program who wish to
 - a. apply for registration and initial licensure as a registered nurse

- b. apply for a temporary licence to engage in the practice of a nurse practitioner while waiting to write the NP exam or awaiting the NP Exam results (optional)
 - c. apply for initial NP licensure once they have passed the NP Exam
- 7. Canadian applicants who already hold or have held registration in another Canadian jurisdiction who wish to apply for registration and initial licensure as a registered nurse
- 8. Members of the College (both RNs and NPs) wishing to renew their license on an annual basis
- 9. Members of the College (both RNs and NPs) who wish to re-activate their licence after not being licensed with the College for a period of time
- 10. Applicants or members who wish to complete a re-entry (refresher) program
- 11. Applicants wishing to be a member of one of the College’s affiliation groups
 - a. non-practising
 - b. Registered Nurse (Retired)

Other categories of affiliation awarded by the College include: honorary-life, honorary, and non-active.

Fees charged

There are two categories of fees charged to applicants and members; services fees and registration/licensure fees. All fees can be found on the College’s website. The most commonly required fees are listed below.

Table 4: 2012 Assessment Fees and Registration Examination Fees (Service Fees)

Service	Price (includes tax)
Initial Assessment Fee – RNs registered in another Canadian jurisdiction	\$34.50
Initial Assessment Fee – Internationally Educated Nurses not Registered in Another Canadian Jurisdiction	\$496.20
Initial Assessment Fee – NPs applying to CRNNS for the first time	\$34.50
Registration Examination (Canadian Registered Nurse Examination)	\$527.19
Registration Examination (Nurse Practitioner Exams)	\$1384.47

Table 5: Registration and Licensure Fees

Registration and Licensure Fee	Price (includes tax)
Temporary Licence (six months)	\$103.50
Registration and Initial Licensure for RNs and NPs	\$450.80*
Initial Licensure for NPs (one time only fee)	\$287.50
Annual licensure (November 1 to October 31) for RNs and NP	\$450.80*

*includes fees remitted to the Canadian Nurses Association (\$54.95) and the Canadian Nurses Protective Society (\$16.26 per RN and \$61.25 per NP)

Registration Decisions

Table 6: Average Number of Days from Complete Application to Registration Decision

Category of applicant	Average Number of Days
Domestic Applicants	2 days
Internationally Educated Nurse Practitioners	59 days*
Internationally Educated Nurses	23 days*

*These time frames are well under the 365 day required under the Pan-Canadian Framework for the Assessment and Recognition of Foreign Qualifications.

There are three categories of registration decisions that can be made once a complete application is reviewed at the College as follows:

1. Full recognition: the applicant met the requirements for registration and licensure and is eligible to
 - a. write the Canadian Registered Nurse Exam and apply for a temporary licence, or
 - b. register and license with the College
2. Partial recognition: the internationally educated nurse applicant is required to complete a competence assessment or bridging education because their nursing program was not substantially equivalent to a nursing education program offered in Nova Scotia
3. Ineligible: the applicant does not meet the requirements for registration and licensure as outlined in the RN Act and Regulations (for example; an IEN who completed a high school nursing program)

Types of Licences/Certificates Issued

RNs are the largest group of health professionals in Canada. According to CIHI⁸ there were more than 360,000 RNs employed in Canada in 2011, working in a variety of settings, representing an increase of roughly 8% since 2007.

According to CIHI, the number of licensed to practice NPs in Canada doubled from 1,344 to 2,777 between 2007 and 2011, reflecting the NP legislation enacted by provinces/territories earlier in the decade. However, they still accounted for only 1% of all RNs. More than half of NPs worked outside of the hospital sector, in areas such as community practice.

Table 7: Number of Members on Each Licensing Roster

Licensing Roster	Number
active-practising	9341
active-practising with conditions or restrictions	41
three month active-practising ⁹	86
transitional	1
transitional with conditions or restrictions	0
temporary	271
temporary with conditions or restrictions	0
nurse practitioner	141
nurse practitioner with conditions or restrictions	2
temporary (nurse practitioner)	0
temporary (nurse practitioner) with conditions or restrictions	0

IEN Retention

Table 8: Retention of Internationally Educated Nurses One Year After Initial Licensure

Licensure year Nov 1-Oct 31	Number of IENs who initially licensed in NS	Number employed in NS within one year of licensure
2006	15	11 (73%)
2007	16	12 (75%)
2008	17	15 (88%)
2009	23	19 (83%)
2010	71	67 (94%)
2011	111	94 (85%)
2012	31	15 (48%)
total	284	233 (82%)

⁸ Canadian Institute of Health Information. *Regulated nurses: Canadian trends, 2007-2011*. Retrieved from website July 16, 2013: https://secure.cihi.ca/free_products/Regulated_Nurses_EN.pdf.

⁹ Members who do not complete the requirements of the College's Continuing Competence Program (CCP) are issued a three month license. If the member fails to meet the requirements of the CCP within the three month, they are no longer licensed with the College and they cannot engage in the practice of nursing.

A number of IENs who received licensure in Nova Scotia in 2010 and 2011 indicated to the College that they were living elsewhere in Canada and were never intending to work in Nova Scotia following initial licensure. Table 8 suggests that most nurses who initially licensed with the College stay in the province for at least one year.

Number of Internal Reviews (for 2012)

There were no internal reviews in 2012. The process for internal reviews is outlined within the RN Act Sections 15 to 19.

About Our Act

The College has nothing to report in this area at this time.

Summary

Since the Fair Registration Practices Act was proclaimed (December 7, 2009), the College has worked diligently to ensure we are in compliance with the principles and requirements identified in the Act.

Some of the steps taken by the College include

1. modifications to our IEN database to ensure we are collecting the correct information to provide in reports to the review officer (2009 to 2010)
2. the development of IEN and registration database¹⁰ queries to allow us to gather and analyze the statistics required to be reported to the review officer (initially 2009 to 2010 and updated in 2013)
3. modification to our application forms to ensure we are collecting the correct information to be placed in IEN and Registration databases to generate the correct statistics for the review officer (initially 2009 to 2010 and updated in 2013)
4. modification to our registration services policies to ensure compliance with the Act (initially in 2009 and updated in 2012 to 2013)
5. modification to the materials provided to applicants on our website (2009 and ongoing)

Overall, the Review Officer has found that the College is currently in compliance with FRPA. One deficiency identified during the review was the need to review and revise the College's website. This action must be completed on or before the next FRPA review in 2015.

¹⁰ The College currently has two databases:

1. The IEN database: tracks the applicants progress from initial application to registration and interfaces with the IEN Application Status Search; and
2. The registration database: contains information about all RNs and NPs who have been registered with the College (i.e., are members of the College).

Two-Year Action Plan:

CRNNS will review the website using the plain language resource and make an attempt to simplify the information using links and lists. Updates will be provided to the review office.

Disclaimer

The College of Registered Nurses of Nova Scotia hereby declares that the information contained in this report is a true and accurate representation of current registration practices for their organization.



Registration Services Policy Consultant

August 1, 2013
Date

Appendix A: FRPA Review Assessment Questionnaire

Regulatory Body – College of Registered Nurses of Nova Scotia

Last updated – Thursday, July 18, 2013 – 09:53

SECTION – INFORMATION

Question 1

How (what methods) do you use to provide information to potential applicants on your registration practices? Can an applicant begin the process outside of Canada?

Survey Options: internet, email, hard copy, telephone or other

Regulator Response: Internet, Email, Hard Copy, Telephone, Other (please specify)

Regulator explanation, clarification or comment

Please Note: For this review, when I refer to:

a) domestic applicants I am including graduates from a Canadian nursing or nurse practitioner program as well as internationally educated nurses (IENs) and nurse practitioners who are or have been registered/licensed in another Canadian jurisdiction;

b) Internationally Educated Nurses (IENs): I am only including nurses who completed their nursing program or nurse practitioner program outside of Canada and have never been registered/licensed anywhere in Canada as a registered nurse.

1. There are a number of licensure options that people can choose from when applying to the CRNNS. Information is available on www.crnns.ca on the following webpages:

New Nova Scotia Graduates seeking registration and licensure:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23086.23091&search=6213>

Domestic applicants seeking registration and licensure:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23086.23092.23108&search=6234>

IEN seeking registration and licensure:

<http://www.crnns.ca/default.asp?mn=414.1116.1128.22987.23086.23093> and
<http://nursingatlanticcanada.com>

Nurse Practitioner (NP) Nova Scotia New Graduate seeking licensure:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.23033.23097.23101&search=6228>

Note: NPs are first required to become registered and hold an active-practising license (RN) with the College before they are eligible to apply for NP licensure.

NP New Graduates from another Canadian Province seeking licensure:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.23033.23097.23102&search=6229>

- a) Note: NPs are first required to become registered and hold an active-practising license (RN) with the College before they are eligible to apply for NP licensure.
- b) NP licensed in another Canadian jurisdiction (AIT) seeking licensure:
<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.23033.23097.23111&search=6245>
- c) Note: NPs are first required to become registered and hold an active-practising license (RN) with the College before they are eligible to apply for NP licensure.
- d) Applicants seeking a temporary licence to engage in the practice of nursing:
<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23086.23092&search=6215>
- e) NP seeking a temporary licence to engage in the practice of a nurse practitioner:
<http://www.crnns.ca/default.asp?mn=414.1116.1128.23033.23096>
- f) RNs wishing to reactivate their NS license after a break in licensure:
<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23085&search=6219>
- g) NPs wishing to reactivate their NS license after a break in licensure:
<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.23033.23099&search=6226>

2. Most correspondence with potential applicants is conducted via email.

a) For domestic RN applicants (other than new NS graduates) they are sent this email:

Subject Line: Application for Initial Registration Assessment in Nova Scotia

The College of Registered Nurses of Nova Scotia (the College) is pleased to learn of your interest in practising nursing in Nova Scotia.

The Application for Initial Registration Assessment in Nova Scotia can be downloaded from our website by selecting www.crnns.ca > Registration > Renew/Apply for RN Licence > Apply for an Initial Licence.

This application includes forms and information for graduates of approved nursing programs within Canada or outside of Canada (if currently or previously registered/licensed in a Canadian province).

The application contains:

- Instructions for completing the application
- Part I – Application for Initial Registration Assessment in Nova Scotia
- Part II – Verification of original nurse registration and examination scores
- Part III – Verification of current and/or previous nurse registration, if different from original (nursing and other professions)
- Part IV – Statement from current/most recent employer
- Criteria for Entry to the Register and Active-Practising Roster
- Canadian and International Criminal Record Checks by CSI

Applicants applying for an active-practising (RN) licence in Nova Scotia must meet the requirements of the College's Continuing Competence Program. This involves completing the Building Your Profile™ booklet or an equivalent self-assessment tool. Further information can be found on our website.

All registration requirements must be completed before eligibility to register with the College is confirmed. Read all instructions carefully and allow 4-6 weeks for your application to be processed.

Nursing in Nova Scotia is self-regulated and is governed by the Registered Nurses Act (2006), Regulations (2009), and By-Laws (2011). The Act requires a person to be registered with the College and hold a current licence before starting to practice nursing in Nova Scotia.

Thank you for your interest in nursing in Nova Scotia.

b) For IENs we provide an electronic file to all applicants describing the application processes, providing information related to ISIS and the Registered Nurses Professional Development Centre (RN-PDC) and including the Standards for Nursing Practice. This electronic file is attached below.

3. We will mail hard copies of the appropriate application information to applicants upon request.

4. We receive telephone calls from potential applicants inquiring about the application process. We ask them to provide their email address so we can send them the electronic information described in #2.

5. We regularly hold face-to-face meetings with potential applicants upon request. During these meetings we review the application requirements and provide printed information to applicants as needed.

6. For new Nova Scotia graduates a member of the registration services staff visits the nursing programs prior to graduation to provide information related to applying to write the registration examination, the registration/licensure process and services available at the CRNNS:

- a) Cape Breton University once per year;
- b) Dalhousie University twice per year (once per year at their satellite program in Yarmouth);
- c) Saint Francis Xavier twice per year.

Other sessions are held upon request.

At these sessions nursing students are given the above information in writing and they have an opportunity to ask questions.

There is an automated form for them if they choose to fill it out online. We accept online payments. We have a status search for them to check the status of their application

Review Finding: Level 3

Regulator Action: No further action at this time.

Section 16(3)(g)

Question 2

Please provide a link to your website.

Regulator Response: <http://www.crnns.ca>

Question 2a

a. I believe that information on our website is: clear and understandable; written in plain language?

Survey Options: 1 (Strongly Agree) - 5 (Strongly Disagree)

Regulator Response: 2

Question 2b

b. On what basis do you make changes to your website?

Survey Options: feedback from applicants, policy change, news postings, or other

Regulator Response: Feedback from Applicants, Policy Change, News Postings, Other (Please Specify)

Question 2c

c. When was the section of the website pertaining to registration last updated?

Survey Options: on-going, within the last 6 months, within the last year, within the last 2 years, or never

Regulator Response: on-going

Regulator explanation, clarification or comment: answer to question 2b. We also change or website information when new best practice information becomes available through a review of the literature or through discussions with our counterparts both nationally and internationally.

Review Finding: Level 2 - Organized but not intuitive

Regulator Action: CRNNS will review the website using the plain language resource, make an attempt to simplify the information using links and lists.
Section 16(3)(g)

Question 3a

a. Are your requirements (e.g. education, work experience, examination and fees) for registration specified by legislation, regulation, and/or policy?
Survey Options: legislation, regulation, or policy

Regulator Response: legislation, Regulation, Policy

Question 3b

b. Specify the appropriate section(s)?

Regulator Response: RN Act Sections 11, 12, 13, 14; RN Regulations S 7, 8, 9, 10, 14, 16, 19, 21, 23, 25, 29; College By-Laws: S 6 and 7; Policies: A-010, A-020, A-030, B-010, B-020, B-030, B-040, C-100, C-110, C-120, D-010, D-020, D-030, D-040, D-050, E-010, E-150, E-160

Question 3c

c. Is this information made available to applicants?
Survey Options: yes, no or not applicable

Regulator Response: Yes

Regulator explanation, clarification or comment: We do not post our policies on our website but we provide the information contained in our policies on our website. We have found that posting the internal CRNNS policies has caused confusion for applicants.

Our RN Act and Regulations are available on the publications section of our website:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1130.2384.2458&se arch=4507>

The CRNNS By-Laws can be found here:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1130.2384.2454&se arch=4503>.

Review Finding: Level 3

Regulator Action: No action required at this time.

Sections 7 (a), 7(c), 7(f), 16(3)(a), 16(3)(d)

Question 4

Are you waiting for legislation to be passed?

Survey Options: yes, no or N/A

Regulator Response: No

Regulator explanation, clarification or comment: We will be going forward to government for changes in our RN Regulations in the near future.

Review Finding: Accepted

Regulator Action: No action required at this time.
Sections 7(d), 16(3)(b)

Question 5a

a. Is the criteria for meeting the requirements of registration documented?

Survey Options: yes or no

Regulator Response: Yes

Question 5b

b. Do you provide applicants with the description of the criteria used to assess whether the requirements have been met (e.g the number of years of schooling needed to be considered equivalent to a degree)?

Survey Options: yes or no

Regulator Response: Yes

Regulator explanation, clarification or comment: The requirements for registration and licensure are set out in the RN Act and Regulations. These documents are publicly accessible. Additionally the registration/licensure requirements are posted on the website. Please refer to the links provided in Question 1 of the "Information" section.

IEN Nursing Program Evaluation:

In keeping with Section 12(2)(e) of the Fair Registration Practices Act, IEN applicants are not provided with the specific criteria used to assess their nursing program. Applicants are informed that we compare their nursing program to that of a Nova Scotia Nursing education program and look for theory and clinical in six areas of nursing: medicine, surgery, pediatrics, obstetrics, mental health and community as well as looking for some specific nursing courses. We will be adding a gerontology requirement in 2013.

Rationale: In the past, RN Regulators in Canada (including the CRNNS) have had fraudulent documents submitted through the application process. Additionally, when we had provided the exact requirements of the College in the past, we have had some nursing programs "modify" their transcripts and program information to meet the CRNNS's requirements.

IEN NP: these individuals are required to complete the RN registration/licensure process first. Once they have received an active-practising license, they can apply for NP licensure. These individuals are sent the following email:

Dear applicant

You must have the Director or designate of your NP Program forward the following to the College:

- Description of the program of study
- Course objectives/outcomes
- Nurse practitioner competencies to be achieved within the program
- Detailed course content (not the brief university program calendar description)

- Number of course hours (theory/lab/clinical)
- Methods of evaluation

The above information is provided to a psychometrician who, along with a nurse practitioner, will determine if the program is equivalent to our Council approved NP Program. The evaluation can cost approximately \$500, however the cost can fluctuate if more information and time is required by the assessors. You are responsible for the cost of this evaluation.

The NP application forms can be found on the following webpage:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.23033.23097.23111&search=6245>

The fact sheet is given to each applicant. There is one "Criteria for Entry..." document for international applicants and one "Criteria for Entry..." document for domestic applicants. Therefore each applicant would receive two sheets.

Review Finding

Level 3 - pertinent information is provided

Regulator Action: No action required at this time.

Sections 7(d), 16(3)(b)

Question 6

If you require translation of specific documents how is the applicant informed?

Survey Options: web site, email, telephone or other

Regulator Response: other (please specify)

Regulator explanation, clarification or comment: all of the above

We have added a statement indicating that the applicant is responsible for the cost of all translations on the following webpage:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23086.23093.23105&search=6232>

Review Finding: Level 3

Regulator Action: No action required at this time.

Section 7(a)

Question 7

Do you have a streamlined registration process for those applicants already registered in another Canadian jurisdiction (as per Chapter 7 Agreement on Internal Trade)?

Survey Options: yes or no

Regulator Response: Yes

Regulator explanation, clarification or comment: IENs who are registered in another Canadian jurisdiction have the same requirements as domestic graduates.

Policy A-010 applies to all applicants who have been registered in another Canadian jurisdiction (either domestically educated or internationally educated)

Policy A-020 it applies to all applicants who have been registered in another Canadian jurisdiction (either domestically educated or internationally educated)

Policy A-030 - English language proficiency - our RN Regulations Section 7(f) state that all applicants for registration "must demonstrate proficiency in the English language in the manner determined by the Executive Director". As you can see by the policy, only applicants who disclose that English is not their primary language may be required to provide proof of English language proficiency.

Policy c-120 - criminal record check - all new applicants to the College or members who have not held licensure with the College for more than two years are required to submit criminal record checks.

Policies with the letter "A" in their number apply to applicants who have been registered in another Canadian jurisdiction (either domestic or internationally educated nurse).

Policies with the letter "B" in their number apply to applicants internationally educated nurses who have never been registered in a Canadian jurisdiction.

Policies with the letter "C" in their number apply to Canadian and IEN Applicants who are writing the CRNE and/or obtaining registration and initial licensure in Nova Scotia.

Policies with the letter "D" in their number apply to all members of the College. (A person is considered a "member" of the College once they have become registered and have received their unique registration number)

Policies with the letter "E" in their number apply to nurse practitioners only.

Review Finding: Level 3

Regulator Action: No action required at this time

Sections 7(a), Ch 7

Question 8

Does your organization make accommodations for applicants with physical or mental disability?

Survey Options: yes or no

Regulator Response: No

Regulator explanation, clarification or comment: We provide testing accommodation during the writing of the Canadian Registered Nurse Exam and the Canadian Nurse Practitioner Exam.

Accommodation for nursing practice would be the responsibility of the employer.

These two policies describe the testing accommodation during the writing of the national registration exams.

C-020 relates to the Canadian Registered Nurse Exam (CRNE)

E-060 related to the Canadian Nurse Practitioner Exam (CNPE)

Review Finding: Level 3

Regulator Action: No action required at this time.

Section 16(3)(h)

Question 9a

a. Is any or all of your assessment process done by a third party (e.g. national bodies, credential assessment agencies, etc.)?

Survey Options: yes or no

Regulator Response: Yes

Question 9b

b. If so, please specify the name of the organization and describe their role.

Regulator Response: World Education Services (WES) <http://www.wes.org/ca/>

Question 9c

c. Please indicate the types of activities that they assist with?

Survey Options: data collection, data storage, credential assessment, verification of documents, examinations, recognition of prior learning or other

Regulator Response: Verification of Documents, Other (please specify)

Question 9d

d. Can you describe how they adhere to the General Duties of the Regulatory Body as outlined in the Act including transparency, objectivity, impartiality and procedural fairness?

Survey Options: MOU, service level agreement, participation on board or other

Regulator Response: Service Level Agreement, Other (please specify)

Question 9e

e. Are you informed of all decisions made by third parties on applicants?

Survey Options: yes or no

Regulator Response: Yes

Question 9f

f. Does your third party have an internal review process for unsuccessful applicants?

Survey Options: yes or no

Regulator Response: No

Regulator explanation, clarification or comment: Question e. and f. are not applicable to the CRNNS and WES. WES does not make any decisions or recommendations related to registration decisions.

WES:

1. authenticates the nursing program transcripts;
2. verifies that the applicant's program existed when and where they completed their program; and
3. that the nursing program was an approved program in their country of study.

WES also provides a statement related to the nursing program equivalence to a degree or diploma.

The following description of WES can be found on our website to clarify the respective roles of WES and the CRNNS:

The WES report is used by the College to a) determine that your nursing program is a recognized program in that country; b) authenticate your nursing program transcript(s); and c) verify that you graduated from that nursing program. This report does not determine that:

1. you have the competencies to practice as a nurse in Nova Scotia;
2. your nursing program is equivalent to a nursing program offered in Nova Scotia; or
3. you are eligible to become registered/licensed with the College.

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23086.23093.23105&search=6232>

The WES report is sent to the both applicant and the CRNNS.

WES provided evidence of transparent, impartial, objective and fair processes.

Review Finding: Level 3

Regulator Action: No action required at this time.

Section 16(3)(i)

Question 10a

a. What types of supports do you provide to applicants during the registration process?

Survey Options: internet, telephone, print material or other

Regulator Response: Internet, Telephone, Print Material, Other (please specify)

Question 10b

b. Have you had applicants who need support mechanisms that you can't provide or are not available?

Survey Options: yes or no

Regulator Response: No

Regulator explanation, clarification or comment:

1. Internet/Email

domestic applicants (RNs and NPs): regular emails are sent to the applicant describing the status of their application. Effective June 2013 applicants will be able to check the status of their application documents through an online portal.

IENs can access an online Application Status Search 24 X 7 X 365 to track the status of their application with the CRNNS. This status search can be found here:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23086.23093.23105.23159&search=6361>

We also respond to a number of emails from IENs asking about the status of their application.

2. Telephone: we respond to telephone calls from applicants asking about the status of their application with the CRNNS.
3. Print material is provided upon request. Most applicants search for information on the website.
4. Face-to-face meetings are held upon request

Also see the answer to question #1.

Review Finding: Level 3

Regulator Action: No action required at this time

Sections 7(e), 16(3)(k)

Question 11

Where practical, do you provide unsuccessful applicants with information on programs and services they can participate in to facilitate successful registration in the future?

Survey Options: yes or no

Regulator Response: Yes

Regulator explanation, clarification or comment: It is rare that an individual is unsuccessful in the application process unless they choose to withdraw from the process or they have exceeded the maximum number of writings of the registration examination (three) without passing (see College By-Laws Sections 6(7), 6(8), and 6(9)).

Failing the Registration Exam:

Applicants looking for RN licensure who fail the registration exam (CRNE) may be directed to seek information at the CLPNNS related to becoming an LPN.

NP applicants who fail the NP registration exam still hold an active-practising (RN) licence and can therefore continue to be employed as an RN.

Review Finding: Level 2 - 3

Regulator Action: No action required at this time.

Section 8(d)

SECTION – COMMUNICATION

Question 1a

a. Do all applications come directly to your regulatory body or does a third party assessor receive initial applications?

Survey Options: direct or third party

Regulator Response: Direct

Question 1b

b. At what point in the registration process do you gain access to an application from an individual?

Regulator Response: From the beginning. They apply directly to the College.

Regulator explanation, clarification or comment: All applications are managed on site at the CRNNS.

Policy A-010 - it applies to all applicants who have been registered in another Canadian jurisdiction (either domestically educated or internationally educated)

Policy B-010 - it applies only to IENs who have never been registered in Canada

Policies with the letter "A" in their number apply to applicants who have been registered in another Canadian jurisdiction (either domestic or internationally educated nurse).

Policies with the letter "B" in their number apply to applicants internationally educated nurses who have never been registered in a Canadian jurisdiction.

Policies with the letter "C" in their number apply to Canadian and IEN Applicants who are writing the CRNE and/or obtaining registration and initial licensure in Nova Scotia.

Policies with the letter "D" in their number apply to all members of the College. (A person is considered a "member" of the College once they have become registered and have received their unique registration number)

Policies with the letter "E" in their number apply to nurse practitioners only.

Review Finding: Accepted

Regulator Action: No action required at this time.
Section 16(3)(i)

Question 2

Do you have a reasonable timeframe to respond to inquiries from applicants?
Survey Options: 1 (very reasonable) - 5 (very unreasonable)

Regulator Response: 1 Very Reasonable
Regulator explanation, clarification or comment: We have a customer service policy.

Review Finding: Accepted
Regulator Action: No action required at this time.
Sections 7(b), 8(a), 8(b), 8(c)

Question 3a

a. Do you provide written decisions, responses and reasons for acceptance or rejection of an application?
Survey Options: yes or no

Regulator Response: Yes

Question 3ai

i. Do you have a formal policy for this process?
Survey Options: yes or no

Regulator Response: Yes
Survey Options: yes or no

Question 3aii

ii. Do you have a standard timeline?
Survey Options: yes or no

Regulator Response: No

Question 3b

b. Do you provide applicants who are not granted registration with information regarding an internal review process (including the opportunity to make submissions respecting such review)?
Survey Options: yes or no

Regulator Response: Yes

Question 3c

c. Based on the previous questions, describe ways your organization could improve the timeliness of your decisions and/or how you communicate the results?

Regulator Response: Our policies do not specify a deadline for making a registration decision because every case is unique. Once we have all of the required application documents our decisions are well under the 365 days maximum established in the Pan-Canadian Framework.

The average length of time for a decision to be communicated to the IEN once the College has received all required documents were:

2013 - 8 applicants to date - 25 days

2012 - 22 applicants - 23 days

2011 - 118 applicants - 23 days

2010 - 378 applicants - 25 days.

The right to appeal a registration decision is imbedded within the appropriate registration policies. The following policies have a statement regarding the right to appeal:

A-010 policy statement 9

B-010 procedure statement 7

B-030 policy statement 4

C-110 policy statement 4

D-050 procedure statement 5

D-100 policy statement 4

E-010 policy statement 9

Refer applicant to Section 15 through 18 of the Act.

Regulator explanation, clarification or comment: None Offered

Review Finding: Level 2 - based on timeline (this will be measure in the annual data requirement)

Regulator Action: No action required at this time.

Sections 8(b), 8(c)

SECTION – DOCUMENTATION

Question 1a

a. Do you provide information on what documentation of qualifications must accompany an application?

Survey Options: yes or no

Regulator Response: Yes

Question 1b

b. Do you include a process for verification of documentation authenticity?

Survey Options: yes or no

Regulator Response: Yes

Regulator explanation, clarification or comment: Also see the answer to "Information" Question #1

a) New Nova Scotia Graduate: the application process is explained here:
<http://www.crnns.ca/default.asp?mn=414.1116.1128.22987.23086.23091>

b) For RN applicants who fall under AIT: the application process is explained here:
<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23086.23092.23108&search=6234> includes this information related to verification of authenticity: Official documents are required with the exception of Part IV (see below), which can be emailed to the College. An official document is one that has been sent in a sealed envelope directly to the College by the issuing authority and has never been in possession of anyone other than the institution that issued it. The College does not accept certified true copies.

c) For IENs:

The following information is on our website in relation to the receipt of documents by the CRNNS:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23086.23093.23105&search=6232>

“Parts II - V are to be sent directly to the College from your original/current registering/licensing authority, school of nursing and current employer. There may be a fee to complete these documents. Official documents are required with the exception of Part IV, which can be emailed to the College. An official document is one that has been sent in a sealed envelope directly to the College by the issuing authority and has never been in possession of anyone other than the institution that issued it. The College does not accept certified true copies.”

Additionally when describing the steps in applying the directions tell the individual how documents must be received at the College (e.g. from source).

d) Nurse Practitioners (new Graduates from Nova Scotia): the application process is explained here:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.23033.23097.23101&search=6228>

e) Nurse Practitioners (New graduates from outside of Nova Scotia): the application process is explained here: <http://www.crnns.ca/default.asp?mn=414.1116.1128.23033.23097.23102>

f) Nurse Practitioners (AIT): the application process is explained here:

<http://www.crnns.ca/default.asp?mn=414.1116.1128.23033.23097.23111>

g) For a temporary licence to engage in the practice of nursing: the application process is explained here:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23087&search=6218>

h) Temporary NP licence: the application process is explained here:

<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.23033.23096&search=6223>

i) Annual Renewal of RN Licence: the application process is explained here:
<http://www.crnns.ca/default.asp?mn=414.1116.1128.22987.23084>

j) Annual NP Licensure: the application process is explained here:
<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.23033.23098&search=6225>

k) For RNs looking to reactivate their licence (i.e. RN was registered and licensed with the CRNNS in the past but their licence had expired and now they wish to become licensed once again): the application process is explained here:
<http://www.crnns.ca/default.asp?mn=414.1116.1128.22987.23085>

l) Reactivation of an NP Licence: the application process is explained here:
<http://www.crnns.ca/default.asp?mn=414.1116.1128.23033.23099>. Because the requirements for reactivation vary based on what the NP has been doing since last licensed with the College, we ask that they contact the College for direction.

m) Non-Practising Affiliation: the application process is explained here:
<http://www.crnns.ca/default.asp?id=190&sfield=Content.Id&mn=414.1116.1128.22987.23088&search=6220>

n) RN (Retired) Affiliation: the application process is explained here:
<http://www.crnns.ca/default.asp?mn=414.1116.1128.22987.23089>

C-110 applies to all applicants for registration or registration and licensure (New graduates from Nova Scotia, applicants who hold registration in another Canadian jurisdiction and internationally educated nurses)

Review Finding: Level 2
Regulator Action: No action required at this time.
Section 9(a)

Question 2

Do you provide information on the steps in the registration process including supporting documentation required at the various steps?

Survey Options: yes or no

Regulator Response: Yes
Regulator explanation, clarification or comment: Please refer to the webpages and policies identified in Question 1 of this section. The expiry dates of documents are also explained to applicants (see policies below).

Review Finding: Level 3
Regulator Action: No action required at this time.
Sections 7(c), 16(3)(a), 16(3)(b)

Question 3

Do you accept alternative information if required documents cannot be obtained for reasons beyond the applicant's control (e.g. a sworn statement in lieu of full documentation)?

Survey Options: yes or no

Regulator Response: Yes

Regulator explanation, clarification or comment: Please see policy statement #5 in policy A-010 and policy statement #6 in policy B-010. This information is shared with the applicant whenever the situation arises. This is a rare occurrence.

Review Finding: Level 3

Regulator Action: No action required at this time.

Sections 9(b), 16(3)(c)

Question 4

What difficulties or obstacles are faced by applicants who received their qualification in a country other than Canada?

Survey Options: obtaining original documents, verification of credentials, identifying and participating in gap training programs, access to qualifying exam, language proficiency or professional technical language or other

Regulator Response: identifying and participating in gap training programs, language proficiency or professional technical language, Other (please specify)

Regulator explanation, clarification or comment: The most common reason cited by IEN applicants for difficulties/delays in the application process relate to immigration issues. Applicants have difficulty obtaining a visa to complete the competence assessment and/or bridging courses.

They sometimes report having difficulty obtaining the require English language proficiency scores. Please note: the English language proficiency scores required by the CRNNS were developed by a National working group. The working group held a standard setting exercise in April 2010 facilitated by two language experts. From this exercise the nursing regulatory bodies across Canada have adopted the same language requirements.

Review Finding: Accepted

Regulator Action: No action required at this time.

Sections 9(b), 16(3)(c)

Question 5a

a. Do you have a process for which requests for access to records are considered?

Survey Options: yes or no

Regulator Response: No

Question 5b

b. Is this made available to applicants to applicants?

Survey Options: yes or no

Regulator Response: No

Question 5c

c. What information may you exclude?

Regulator Response: We have never had a request from an applicant to review their application.

Question 5d

d. Do you charge a fee?

Survey Options: yes or no

Regulator Response: No

Regulator explanation, clarification or comment: None Offered

Review Finding: Level 1 - Section 12 of FRPA requires consideration of access to records

Regulator Action

National Nursing Assessment Service (NNAS) is currently under development. They will ensure that applicants and CRNNS will receive copies of all documentation received during the application process.

CRNNS specifies where information is not shared with the applicant (e.g. specific assessment criteria - B-010)

No action required at this time.

Section 12(1), 16(3)(j)

SECTION – INTERNAL REVIEW

Question 1

Does your Act include an authority to conduct an internal review of the registration decision?

Survey Options: yes or no

Regulator Response: Yes

Regulator explanation, clarification or comment: RN Act (2006) Sections: 15, 16, 17, 18, 58:

15 Where an applicant

- (a) has been refused registration; or
- (b) has been refused an active-practising licence or a transitional licence,
- (c) the Executive Director shall give written reasons for such decision and the applicant may, by written notice, appeal that decision to the Registration Appeal Committee within thirty days of receipt of the written notice.

16 (1) The Council shall appoint a Registration Appeal Committee, the membership of which consists of one public representative, three registered nurses from the active-practising roster and one registered nurse from the nurse practitioner roster.

(2) The Council shall appoint the Chair of the Registration Appeal Committee.

(3) A majority of the Registration Appeal Committee constitutes a quorum.

(4) Notwithstanding subsection (3), where a nurse practitioner files an appeal with the Registration Appeal Committee, a quorum of the Committee must include the nurse practitioner member of the Committee.

(5) The Registration Appeal Committee shall perform such functions as are set out in this Act, the regulations and the by-laws.

(6) Each person on the Registration Appeal Committee has all the rights, powers and privileges of a commissioner appointed pursuant to the Public Inquiries Act.

17 (1) The Registration Appeal Committee, upon receipt of an appeal pursuant to Section 15 or 58 shall

(a) set a date for a hearing of the appeal, which must be not later than sixty days following receipt of the written notice of appeal;

(b) serve written notice of the date, time and place for the hearing of the appeal upon the appellant and the Executive Director; and

(c) advise the appellant of the right to

(i) be represented by legal counsel, a union representative or another representative at the expense of the appellant,

(ii) disclosure of any information to be provided to the Committee, and

(iii) a reasonable opportunity to present a response and make submissions.

(2) The parties to an appeal before the Registration Appeal Committee are the College and the appellant.

(3) Evidence is not admissible before the Registration Appeal Committee unless, at least ten days before the appeal, the opposing party has been given

(a) in the case of written or documentary evidence, an opportunity to examine the evidence;

(b) in the case of evidence of an expert, a copy of the expert's written report or, where there is no written report, a written summary of the evidence; and

(c) in the case of evidence of any other witness, the identity of the witness.

(4) Notwithstanding subsection (3), the Registration Appeal Committee may, in its discretion, allow the introduction of evidence that is otherwise inadmissible under subsection (3) and may make directions it considers necessary to ensure that a party is not prejudiced.

(5) In a proceeding before the Registration Appeal Committee, the parties have the right to

(a) the opportunity to present evidence and make submissions, including the right to cross-examine witnesses; and

(b) receive written reasons for a decision within a reasonable time.

(6) At a hearing before the Registration Appeal Committee, all material relied upon by the Executive Director in making the decision that is the subject of the appeal must be provided to the Committee and to the appellant.

(7) In addition to the material provided to the Registration Appeal Committee pursuant to subsection (6), either party may present additional evidence to the Committee and call witnesses.

(8) The testimony of witnesses at a hearing before the Registration Appeal Committee shall be taken under oath or affirmation.

18 (1) The Registration Appeal Committee, in accordance with the evidence it receives when hearing an appeal, may make any determination that, in its opinion, ought to have been made by the Executive Director.

(2) The Registration Appeal Committee shall give its decision in writing and send to the applicant a copy of the written decision by registered mail or personal service.

(3) The decision of the Registration Appeal Committee is final.

58 Where an applicant has been refused the endorsement on the applicant's licence to practise nursing pursuant to subsection 57(1), the Executive Director shall give written reasons and the applicant may, by written notice, appeal that decision to the Registration Appeal Committee within thirty days of receipt of the written notice.

Review Finding: Level 3

Regulator Action: No action required at this time.

Section 7(a)

Question 2

Do you have a regulation or by-law that defines the internal review process?

Survey Options: yes or no

Regulator Response: Yes

Regulator explanation, clarification or comment: The Registration Appeal Committee is described in the RN Act and not in the RN Regulations or the College By-Laws.

Review Finding: Level 3

Regulator Action: No action required at this time.

Section 7(a)

Question 3

When are unsuccessful candidates informed of their right to internal review of a registration decision?

Survey Options: upon application, included with a registration decision, upon request or other

Regulator Response: Included with a registration decision

Regulator explanation, clarification or comment: Included when the applicant is denied registration and/or licensure:

Policy A-010 policy statement 9

Policy B-010 procedure statement 7

Policy C-110 policy statement 4

Policy E-010 policy statement 9, 10, 11 and 13

Review Finding: Level 2

Regulator Action: No action required at this time.

Sections 7(a), 10(1)

Question 4a

a. Do you have an internal review process and procedures document (policy document)?
Survey Options: yes or no

Regulator Response: No

Question 4b

b. Does this include time frames for the internal review?
Survey Options: yes, no or not applicable

Regulator Response: Not Applicable

Regulator explanation, clarification or comment: The internal review process along with associated timelines are clearly outlined in the RN Act Sections 15 and 17.

Section 15 Where an applicant

(a) has been refused registration; or
(b) has been refused an active-practising licence or a transitional licence,
the Executive Director shall give written reasons for such decision and the applicant may, by written notice, appeal that decision to the Registration Appeal Committee within thirty days of receipt of the written notice.

Section 17 (1) The Registration Appeal Committee, upon receipt of an appeal pursuant to Section 15 or 58 shall

(a) set a date for a hearing of the appeal, which must be not later than sixty days following receipt of the written notice of appeal;

Review Finding: Level 3

Regulator Action: No action required at this time.

Sections 7(a), 10(1)

Question 5a

For the internal review process you make available to applicants that are not granted registration:
a. Summarize the process of the internal review?

Regulator Response: The CRNNS has never had a registration appeal and therefore the Registration Appeal Committee has never met to review an appeal.

The appeal process is described in the RN Act (2006). The applicant has 30 days from the date of written decision to submit an appeal to the CRNNS. Within 60 days the Registration Appeal Committee must be convened to consider the matter.

Question 5b

b. Describe the opportunities made available to an applicant to make submissions respecting such review.

Regulator Response: Evidence is not admissible before the Registration Appeal Committee unless, at least ten days before the appeal, the opposing party has been given

- (a) in the case of written or documentary evidence, an opportunity to examine the evidence;
- (b) in the case of evidence of an expert, a copy of the expert's written report or, where there is no written report, a written summary of the evidence; and
- (c) in the case of evidence of any other witness, the identity of the witness.

17 (6) At a hearing before the Registration Appeal Committee, all material relied upon by the Executive Director in making the decision that is the subject of the appeal must be provided to the Committee and to the appellant.

17 (7) In addition to the material provided to the Registration Appeal Committee pursuant to subsection (6), either party may present additional evidence to the Committee and call witnesses. Both the applicant submitting the appeal and the College are expected to submit their supporting documentation to the registration appeal committee at least 10 days prior to the registration appeal committee meeting.

However, the registration appeal committee will allow the applicant to submit any information up to and including the day of the registration appeal committee meeting.

Question 5c

c. Specify the format for the internal review submission

Survey Options: oral, written or other

Regulator Response: Written

Question 5d

d. What is the timeline for submitting supporting evidence?

Regulator Response: a minimum of 10 days prior to the registration appeal committee meeting

Question 5e

e. Do you believe this is enough time to receive supporting evidence from outside Canada?

Survey Options: yes or no

Regulator Response: Yes

Regulator explanation, clarification or comment: The applicant has 30 days to submit an appeal and up to 50 days to submit supporting documents. During this time the applicant could be arranging for documentation to be received.

Review Finding: Level 3

Regulator Action: No action required at this time.

Sections 7(a), 10(1), 10(2), 10(4), 16(3)(m)

Question 6a

a. Are the results of the internal review made available to applicants in writing, with reasons?
Survey Options: yes or no

Regulator Response: Yes

Question 6ai

i. In what timeframe are the results of the internal review made available to applicants?
Survey Options: less than 1 month, 1-2 months or greater than 6 months

Regulator Response: 1-2 months

Question 6aii

ii. Are these timelines communicated?
Survey Options: yes or no

Regulator Response: No

Regulator explanation, clarification or comment: The RN Act does not specify a deadline for communication of the Registration Appeal Committee decision to the applicant. However, I would expect that the committee would inform the applicant at the end of the registration appeal committee meeting when they expect to make their decision.

The applicant is usually informed of the decision during a meeting. The Committee will usually provide a written decision at the end of the meeting and give it to the applicant. If the decision cannot be written during the meeting, it is sent to the applicant within a few days of the meeting.

18 (1) The Registration Appeal Committee, in accordance with the evidence it receives when hearing an appeal, may make any determination that, in its opinion, ought to have been made by the Executive Director.

(2) The Registration Appeal Committee shall give its decision in writing and send to the applicant a copy of the written decision by registered mail or personal service.

(3) The decision of the Registration Appeal Committee is final.

Review Finding: Level 2 - Timelines should always be a consideration - will be monitored through the annual data collection.

Regulator Action: No action required at this time.
Sections 7(a), 10(3)

Question 7

Have individuals who make internal review decisions received appropriate training?
Survey Options: yes or no

Regulator Response: No

Regulator explanation, clarification or comment: There have not been any opportunities to provide the registration appeal committee members with education. Additionally because there have been no appeals at the CRNNS, education will be provided to the Committee on an ad needed basis.

Internal education will be provided by a public member of the Professional Conduct Committee who is also a member of the Registration Appeal Committee. Orientation training includes how to conduct meetings, handle documentation and decision making.

Review Finding: The FRPA Review Office will look into providing NS regulatory bodies with education in this area.

Regulator Action: No action required at this time.

Sections 7(a), 11, 16(3)(p)

Question 8

Do you have a prohibition that states ‘no one who acted as a decision-maker in respect of a registration decision acted as decision maker in an internal review’?

Survey Options: yes or no

Regulator Response: Yes

Regulator explanation, clarification or comment: The membership of the Registration Appeal Committee is described in Section 16 of the RN Act:

6 (1) The Council shall appoint a Registration Appeal Committee, the membership of which consists of one public representative, three registered nurses from the active-practising roster and one registered nurse from the nurse practitioner roster.

(2) The Council shall appoint the Chair of the Registration Appeal Committee.

(3) A majority of the Registration Appeal Committee constitutes a quorum.

(4) Notwithstanding subsection (3), where a nurse practitioner files an appeal with the Registration Appeal Committee, a quorum of the Committee must include the nurse practitioner member of the Committee.

CRNNS staff are not permitted to be a member of the Registration Appeal Committee. The staff support assigned to the committee does not work in registration services and therefore is not involved in any registration decisions.

Review Finding: Level 3

Regulator Action: No action required at this time.

Sections 7(a), 10(5), 16(3)(n)

Appendix B – Copies of Blank Application Forms for Registration

Appendix B1: New Nova Scotia Graduates: Application to Write the Canadian Registered Nurse Exam (online form)

Please fill in the following form: (fields marked with a * are required fields)

First Name: *

Middle Name:

Last Name: *

Previous Last Name:

Date of Birth: * (MM-DD-YYYY)

Email: *

School of Nursing: -- Please Select -- *

In which country is your nursing school located: Canada *

If not in list, please specify *

Date of Program Entrance: * (YYYYMM)

Date of Program Completion: * (YYYYMM)

Gender: Female Male

Language in which you wish to write the exam: English French

Current Mailing Address

Address 1: *

Address 2:

City: *

Province/State: *

Postal Code: *

Country: Canada *

Phone: *

Mailing Address for Exam Results Check if same as above

Mailed 4-5 weeks after exam writing date.

Address 1: *

Address 2:

City: *

Province/State: *

Postal Code: *

Country: Canada *

Phone: *

Please indicate preferred location to write exam: -- Please Select -- *

If applying to write out of province, please indicate the city and province where you want to write.

IMPORTANT: If the province that you indicate below cannot accommodate your request to write there, you must write the exam in Nova Scotia.

City:

Province/State:

I certify that the information provided on this form is true.

Name: *

*I confirm that I am the person named above.

Appendix B2: Applicants Already Registered in Another Canadian Jurisdiction



College of Registered Nurses of Nova Scotia – Registration Services

Suite 4005, 7071 Bayers Rd. Halifax NS, Canada B3L 2C2
 Telephone: 1-902-491-9744, ext 239 Toll Free: 1-800-565-9744 Facsimile: 1-902-491-9510
 E-mail address: registration@crnns.ca Website: www.crnns.ca

APPLICATION FOR INITIAL REGISTRATION ASSESSMENT IN NOVA SCOTIA

PART 1 – I hereby apply for registration as a registered nurse in Nova Scotia under the terms of the *Registered Nurses Act (2006)*.

Please return the completed application to the College at the address noted above, with **proof of legal name, photo ID** and **assessment fee of \$57.50** (Canadian funds, includes HST) if registered in Canada. **Note:** Your application will not be processed without receipt of fee.

A. Personal Information – Show given names in full.

Surname – Print in Block Letters		First Name	Middle Name		
Birth Name		Former Name(s)		Date of Birth (M/D/Y)	
Permanent Mailing Address	City/Town	Province	Postal Code	Country	

B. Initial Nursing Education

Name of School of Nursing	Address	City/Town	Province	Country
Program Started (Month/Year)		Program Completed (Month/Year)		

C. Other Education

<i>In Nursing (post RN)</i>		<i>In Other Than Nursing</i>	
	Month/Year Completed		Month/Year Completed
Certificate		Certificate	
Baccalaureate		Baccalaureate	
Master		Master	
Doctorate		Doctorate	
Other:		Other:	

D. Nurse Registration – List original jurisdiction and all jurisdictions where you currently hold or have held registration and/or licensure (nursing and other regulated professions). (you may attach another page if needed):

Province, State or Country	Registration #	Current Status (Active/Non-Active)	Date Issued (Month/Year)	Date Expired (Month/Year)



College of Registered Nurses of Nova Scotia – Registration Services

Suite 4005, 7071 Bayers Rd. Halifax NS, Canada B3L 2C2
Telephone: 1-902-491-9744, ext 239 Toll Free: 1-800-565-9744 Facsimile: 1-902-491-9510
E-mail address: registration@crnns.ca Website: www.crnns.ca

E. Status of Registration

- 1. Have you ever been charged with, pleaded guilty to, been convicted of or found to be guilty of an offence in or out of Canada, for which you have not received a pardon? Yes ___ No ___ If yes, explain
- 2. Are you currently under investigation by any registration/licensing authority? Yes ___ No ___ If yes, explain
- 3. Do you currently hold a licence with another health profession? Yes ___ No ___ If yes, explain
- 4. Have you ever been disciplined by a registration/licensing authority for any occupation/profession in or out of Canada. Yes ___ No ___ If yes, explain
- 5. Do you have any conditions or restrictions on any licence that you currently hold? Yes ___ No ___ If yes, explain
- 6. Have you ever been denied or had revoked any registration, licence, or permit Yes ___ No ___ If yes, explain
- 7. Were you ever disciplined by or expelled from any university or school of nursing? Yes ___ No ___ If yes, explain
- 8. Have you ever been suspended or terminated from any employment? Yes ___ No ___ If yes, explain
- 9. Is there, to your knowledge or belief, any event, circumstance or condition concerning your competence, character, capacity, conduct or reputation that may impact your registration as a registered nurse? Yes ___ No ___ If yes, explain

IF ANSWERING "YES" TO QUESTIONS 1-9, PLEASE ATTACH AN EXPLANATION.

F. Nursing Practice

Please record the total number of actual hours worked as a registered nurse from **November 1 to October 31** for the current and previous five years.

20__ - ____ hours (current year, to date of application)	20__ - ____ hours (three years previous)
20__ - ____ hours (one year previous)	20__ - ____ hours (four years previous)
20__ - ____ hours (two years previous)	20__ - ____ hours (five years previous)

Have you taken a nursing re-entry program in the last five years? Yes ___ No ___

If yes:

Name of program _____

Location _____

Date completed _____



College of Registered Nurses of Nova Scotia – Registration Services
 Suite 4005, 7071 Bayers Rd. Halifax NS, Canada B3L 2C2
 Telephone: 1-902-491-9744, ext 239 Toll Free: 1-800-565-9744 Facsimile: 1-902-491-9510
 E-mail address: registration@crnns.ca Website: www.crnns.ca

G. Nursing Experience Following Graduation - Complete contact information of two most recent employers:

Immediate Supervisor & Position Title	Facility Name	Facility Address	Facility E-mail & Telephone #	Dates of Employment

H. List the Countries/Provinces/States Where You Have Resided, Worked or Studied After the Age of 18

Applicant's Current Mailing Address

Street Address

City/Town

Province/State

Postal Code

Country

E-mail address

Telephone #

Signature Declaration



College of Registered Nurses of Nova Scotia – Registration Services

Suite 4005, 7071 Bayers Rd. Halifax NS, Canada B3L 2C2
Telephone: 1-902-491-9744, ext 239 Toll Free: 1-800-565-9744 Facsimile: 1-902-491-9510
E-mail address: registration@crnns.ca Website: www.crnns.ca

By signing this application form:

I authorize the collection, use and disclosure of personal information concerning myself as described in the College of Registered Nurses of Nova Scotia (the College) Privacy of Member Information Policy. You can find this policy on the following webpage: <http://www.crnns.ca/default.asp?mn=414.1116.1137>.

In addition, I authorize the College to carry out the procedures necessary for the assessment of my eligibility for registration. This includes making copies of my application documents for the purpose of assessment and/or contacting the institutions or authorities stated on this application to verify the authenticity of my documents and the information provided in my application. **This Signature Declaration allows the College to contact other regulatory bodies and obtain information pertinent to my application.** I agree that a copy of this *Signature Declaration* can be sent by the College to other regulatory bodies allowing them to release information to the College.

I declare that all of the information I have provided in my application is complete and truthful. I understand that the College will immediately stop the assessment of my application and that my application for assessment will be cancelled, registration will be refused, and I will be prohibited from applying to the College in the future if:

1. I have provided any inaccurate information; or
2. I have omitted required information; or
3. the College determines that any documents submitted during the application or assessment process have been altered, tampered with or forged.

This applies to all documents received during the application process including written correspondence. The College will not issue a refund and will retain all documents submitted with my application.

This Signature Declaration authorizes the College to share with other Canadian regulatory bodies that my application for registration has been refused because of one of the three reasons listed above.

I understand that in order to practise nursing in Nova Scotia, I am required by law to hold a licence with the College, before I commence employment, including any orientation.

I understand that this application for assessment of eligibility for registration/licensure will be considered lapsed when the Part I and application fee submitted to the College is more than 6 months old and I have not been in contact with the College for 6 months or more. Should my file lapse, I understand I will be required to submit a new application form, initial assessment fee and updated documentation, and that if I do not re-apply, my file documents will be securely destroyed five (5) years after the date they are considered lapsed.

I have read and understand the above and the information on this form and agree to the terms stated herein.

Print Name

Date

Signature of Applicant

Signature of Witness

Date

Appendix B3: Internationally Educated Nurses Who have Never Been Registered in Another Canadian Jurisdiction



College of Registered Nurses of Nova Scotia – Registration Services
 Suite 4005, 7071 Bayers Rd. Halifax NS, Canada B3J 2C2
 Telephone: 1-902-491-9744, ext 252 Toll Free: 1-800-563-9744 Facsimile: 1-902-491-9510
 E-mail address: ien@crnns.ca Website: www.crnns.ca

APPLICATION FOR INITIAL REGISTRATION ASSESSMENT FOR IENS WHO HAVE NEVER BEEN REGISTERED IN CANADA

PART I – I hereby apply for registration as a registered nurse in Nova Scotia under the terms of the *Registered Nurses Act (2006)*. Please return the completed application to the College at the address noted above, with proof of legal name (i.e., copy of birth and marriage certificates), photo ID (i.e., copy of passport) and non-refundable assessment fee of **\$575.00** (Canadian funds, includes HST). Payment can be made by international money order or online by credit card. We do not accept international demand drafts or cheques. Note: Your application will not be processed without receipt of fee.

A. Personal Information – Show given names in full.

Surname – Print in Block Letters		First Name	Middle Name		
Birth Name	Former Name(s)		Date of Birth (M/D/Y)		
Permanent Mailing Address	City/Town	Province	Postal Code	Country	

B. Initial Nursing Education

Name of School of Nursing	Address	City/Town	Province	Country
Program Started (Month/Year)		Program Completed (Month/Year)		

C. Other Education

<i>In Nursing (post RN)</i>		<i>In Other Than Nursing</i>	
	Month/Year Completed		Month/Year Completed
Certificate		Certificate	
Baccalaureate		Baccalaureate	
Master		Master	
Doctorate		Doctorate	
Other:		Other:	

D. Registration/Licensure – List original jurisdiction and all jurisdictions where you currently hold or have held registration and/or licensure (nursing and other regulated professions). (you may attach another page if needed)

Province, State or Country	Registration #	Current Licensure Status (Active/Non-Active)	Date Licence Issued (Month/Year)	Date Licence Expired (Month/Year)

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E. Status of Registration

- | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--------------------------------|
| 1. Have you ever been charged with, pleaded guilty to, been convicted of or found to be guilty of an offence in or out of Canada, for which you have not received a pardon? | Yes ___ No ___ If yes, explain |
| 2. Are you currently under investigation by any registration/licensing authority? | Yes ___ No ___ If yes, explain |
| 3. Do you currently hold a licence with another regulated profession? | Yes ___ No ___ If yes, explain |
| 4. Have you ever been disciplined by a registration/licensing authority for any occupation/profession in or out of Canada. | Yes ___ No ___ If yes, explain |
| 5. Do you have any conditions or restrictions on any licence that you currently hold? | Yes ___ No ___ If yes, explain |
| 6. Have you ever been denied or had revoked any registration, licence, or permit? | Yes ___ No ___ If yes, explain |
| 7. Were you ever disciplined by or expelled from any university or school of nursing? | Yes ___ No ___ If yes, explain |
| 8. Have you ever been suspended or terminated from any employment? | Yes ___ No ___ If yes, explain |
| 9. Is there, to your knowledge or belief, any event, circumstance or condition concerning your competence, character, capacity, conduct or reputation that may impact your registration as a registered nurse? | Yes ___ No ___ If yes, explain |

IF ANSWERING "YES" TO QUESTIONS 1-9, PLEASE ATTACH AN EXPLANATION.

- | | |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------|
| 10. Have you ever written the Canadian Registered Nurse Examination (RN exam) for registration in another Canadian jurisdiction? | Yes ___ No ___ If yes, explain |
| 11. Has another regulatory body in Canada mandated that you take a competence or SEC assessment? (e.g., a competence assessment of your knowledge, skills and abilities using tools such as observation, interviews and written tests.)? | Yes ___ No ___
If yes, answer question #11 |
| 12. Have you ever completed a competence or SEC assessment in another Canadian jurisdiction?
If you answered yes to question #11, please arrange for a certified true copy of the following to be forwarded to the College from the regulatory body as applicable: | Yes ___ No ___ |
| <ul style="list-style-type: none"> • all letters associated with the process; • the assessment report; and • transcripts of education completed to bridge the gaps identified in the assessment report. | |
| 13. Have you applied for registration with any other regulatory bodies in Canada?
If yes, please list: | Yes ___ No ___ |

_____	_____
_____	_____
_____	_____



College of Registered Nurses of Nova Scotia – Registration Services
 Suite 4005, 7071 Bayers Rd. Halifax NS, Canada B3L 2C2
 Telephone: 1-902-491-9744, ext 252 Toll Free: 1-800-565-9744 Facsimile: 1-902-491-9510
 E-mail address: icn@crnns.ca Website: www.crnns.ca

F. Nursing Practice

Please record the total number of actual hours worked as a registered nurse from **November 1 to October 31** for the current and previous five years.

20__ - ____ hours (current year, to date of application) 20__ - ____ hours (three years previous)
 20__ - ____ hours (one year previous) 20__ - ____ hours (four years previous)
 20__ - ____ hours (two years previous) 20__ - ____ hours (five years previous)

Have you taken a nursing re-entry program in the last five years? Yes ___ No ___

If yes:

Name of program _____
 Location _____
 Date completed _____

G. Nursing Experience Following Graduation – Include all RN work experience since graduation, starting with the most recent (you may attach another page if needed).

Dates of Employment	Facility Name, Address, E-mail & Phone Number	Immediate Supervisor & Position Title	Description of Nursing Experience

H. List the Countries/Provinces/States Where You Have Resided, Worked or Studied After the Age of 18

Applicant's Current Mailing Address

Street Address _____
 City/Town Province/State Postal Code Country
 E-mail address Telephone #

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College of Registered Nurses of Nova Scotia – Registration Services
Suite 4005, 7071 Bayers Rd. Halifax NS, Canada B3L 2C2
Telephone: 1-902-491-9744, ext 252 Toll Free: 1-800-565-9744 Facsimile: 1-902-491-9510
E-mail address: ien@crnns.ca Website: www.crnns.ca

Signature Declaration

By signing this application form:

I authorize the collection, use and disclosure of personal information concerning myself as described in the College of Registered Nurses of Nova Scotia (the College) Privacy of Member Information Policy. You can find this policy on the following webpage: <http://www.crnns.ca/default.asp?mn=414.1116.1137>.

In addition, I authorize the College to carry out the procedures necessary for the assessment of my eligibility for registration. This includes making copies of my application documents for the purpose of assessment and/or contacting the institutions or authorities stated on this application to verify the authenticity of my documents and the information provided in my application. **This Signature Declaration allows the College to contact other regulatory bodies and obtain information pertinent to my application.** I agree that a copy of this *Signature Declaration* can be sent by the College to other regulatory bodies allowing them to release information to the College.

I declare that all of the information I have provided in my application is complete and truthful.

I understand that the College will immediately stop the assessment of my application and that my application for assessment will be cancelled, registration will be refused, and I will be prohibited from applying to the College in the future if:

4. I have provided any inaccurate information; or
5. I have omitted required information; or
6. the College determines that any documents submitted during the application or assessment process have been altered, tampered with or forged.

This applies to all documents received during the application process, including educational transcripts, verifications of registration and written correspondence. The College will not issue a refund and will retain all documents submitted with my application.

This Signature Declaration authorizes the College to share with other Canadian regulatory bodies that my application for registration has been refused because of one of the three reasons listed above.

I understand that in order to practise nursing in Nova Scotia, I am required by law to hold a licence with the College before I commence employment, including any orientation.

I understand that this application for assessment of eligibility for registration/licensure will be considered lapsed when the Part I and application fee submitted to the College is more than 24 months old and I have not been in contact with the College for 12 months or more. Should my file lapse, I understand I will be required to submit a new application form, initial assessment fee and updated documentation, and that if I do not re-apply, my file documents will be securely destroyed five (5) years after the date they are considered lapsed.

I have read and understand the above and the information on this form and agree to the terms stated herein.

Print Name

Date

Signature of Applicant

Signature of Witness

Date

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**APPLICATION FOR INITIAL REGISTRATION ASSESSMENT FOR
INTERNATIONALLY EDUCATED NURSES (IEN) WHO HAVE NEVER BEEN
REGISTERED IN CANADA**



Part V – Verification of Graduation from School of Nursing

Section A Applicant to complete section A and forward to your school of nursing for completion of Section B. Your school is to mail it directly to the College of Registered Nurses of Nova Scotia (the College) at the address noted below.

Name _____
Surname Birth/Former Name(s) Given Names
 School of Nursing _____ Year graduated _____

Your school of nursing is to mail your school transcripts directly to:
**WORLD EDUCATION SERVICES
 1400-2 CARLTON ST
 TORONTO ON M5B 1J5
 CANADA**

Section B To be completed by the Director, School of Nursing, and mailed directly to the College of Registered Nurses of Nova Scotia. Kindly provide the requested information regarding the nursing program completed by the above named applicant. If the program was taken in a country where English is not the official language, please secure translations through the nursing association in your country, or a qualified translator.

THIS CERTIFIES THAT

born on _____ was admitted to _____
Month/Day/Year Surname Birth/Former Name(s) Given Names (Underline name used when enrolled in school)
 in _____ The program commenced _____ and was completed _____
City/Province/State/Country Month/Year Month/Year
 and the applicant was awarded a(n): _____ associate degree _____ diploma _____ baccalaureate degree. The program led to qualification as a general registered nurse: _____ yes _____ no. If no, please explain: _____

The language of instruction for both theory and clinical was _____
 The length of the program was _____ months and included theory and clinical courses at the general nursing level.

CRITICAL INFORMATION:

The table below **MUST** be completed, identifying the number of theory and clinical hours in the five (5) program areas. The application cannot be processed without this information. A "good faith" estimate will be accepted.

Program Areas	Total Theory Hours	Total Clinical Hours*
Medical / Surgical Nursing (including specialty areas)		
Obstetrical Nursing		
Pediatric Nursing		
Psychiatric Nursing		
Community Health Nursing		

*Clinical hours do not include simulated client situations in the lab, high fidelity computerized patients, models, or simulators. Clinical experience must be face to face contact with clients in various health care settings.

A copy of the course descriptions/syllabi has been attached to this form: _____ yes _____ no
 If no, please explain: _____

At the time the above program was taken, the school was approved officially by: _____

Signature _____ Print Name _____
 Position _____ Date _____

The applicant's official transcript must be forwarded from the school of nursing directly to World Education Services (WES). See Section A of this form for mailing address.

Seal of the school of nursing is to be imprinted on the transcript and on this form.
 SEAL

College of Registered Nurses of Nova Scotia
 Suite 4005, 7071 Bayers Rd, Halifax NS, Canada B3L 2C2
 Phone 902-491-9744, ext 222 Toll Free in Nova Scotia 1-800-565-9744 Fax 902-491-9580
 E-mail address: cen@cnrs.ns.ca Website: www.cnrs.ns.ca

Appendix B4: Nurse Practitioners



College of Registered Nurses of Nova Scotia – Registration Services
 Suite 4005, 7071 Bayers Rd. Halifax NS, Canada B3L 2C2
 Telephone: 1-902-491-9744, ext 239/225 Toll Free: 1-800-565-9744 Facsimile: 1-902-491-9510
 E-mail address: registration@crnns.ca Website: www.crnns.ca

Page 1 of 4

Part I: Application for Initial Nurse Practitioner Licence

1. Personal Information

Surname (please print) _____ Given names _____

Birth/former name(s) _____ Date of birth (M/D/Y) _____

Street/mailling address _____

City/town _____ Province _____ Postal code _____ Country _____

Telephone (Home) _____ (Work) _____ Fax # _____

E-mail address _____ CRNNS registration # _____ Expiry date (M/D/Y) _____

2. Past & Current Nurse Practitioner Registrations:

Reg # _____ Province/state/country _____ Date issued _____ M/D/Y Expiry date _____ M/D/Y

Reg # _____ Province/state/country _____ Date issued _____ M/D/Y Expiry date _____ M/D/Y

3. Nurse Practitioner Education

Nurse Practitioner Education Program _____

School/Institute _____

Address _____

Year Graduated _____ M/D/Y Nurse practitioner program title _____

Focus of study Family/All Ages Adult Pediatric (child) Neonate

Official transcript Enclosed Will Follow

For Office Processing fee rec'd _____

Use Only Reg # _____ Fee paid \$ _____ (cash /cheque /mo) NP licence issued _____ M/D/Y

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College of Registered Nurses of Nova Scotia – Registration Services
Application for Initial Nurse Practitioner Licence Part I

4. Nurse Practitioner Employment (most recent):

Employer name _____
(please print)
Mailing address _____
Telephone _____ Fax _____ E-mail address _____
Employment dates: From _____ to _____
M/D/Y M/D/Y

If in independent practice/self-employed:

Business name _____
(please print)
Mailing address _____
Telephone _____ Fax _____ E-mail address _____
Self-employed employment dates: From _____ to _____
M/D/Y M/D/Y

5. Referees:

Name and contact information of the two referees who will provide the assessment of your performance in the practice of a nurse practitioner:

Name _____ Title _____
(please print) (please print)

Telephone # _____ Facility _____
E-mail address _____ Fax # _____
Name _____ Title _____
(please print) (please print)

Facility _____ Telephone # _____
E-mail address _____ Fax # _____

6. Practice Hours:

Number of practice hours as a nurse practitioner in the 2-year period immediately preceding application. To confirm practice hours the applicant must submit a letter from the employer verifying hours practised as a nurse practitioner.

Enclosed Will follow N/A

If self-employed, submit documentation verifying practice hours.

Enclosed Will follow N/A

NOTE: Applicants may be asked to forward additional detailed information to complete documentation required for program equivalency and/or competence assessment.

7. Status of Registration

14. Have you ever been charged with, pleaded guilty to, been convicted of or found to be guilty of an offence in or out of Canada, for which you have not received a pardon? Yes ___ No ___ If yes, explain _____
15. Are you currently under investigation by any registration/licensing authority? Yes ___ No ___ If yes, explain _____
16. Do you currently hold a licence with another regulated profession? Yes ___ No ___ If yes, explain _____



**College of Registered Nurses of Nova Scotia – Registration Services
Application for Initial Nurse Practitioner Licence Part I**

Page 4 of 4

17. Have you ever been disciplined by a registration/licensing authority for any occupation/profession in or out of Canada. Yes ___ No ___ If yes, explain
18. Do you have any conditions or restrictions on any licence that you currently hold? Yes ___ No ___ If yes, explain
19. Have you ever been denied or had revoked any registration, licence, or permit? Yes ___ No ___ If yes, explain
20. Were you ever disciplined by or expelled from any university or school of nursing? Yes ___ No ___ If yes, explain
21. Have you ever been suspended or terminated from any employment? Yes ___ No ___ If yes, explain
22. Is there, to your knowledge or belief, any event, circumstance or condition concerning your competence, character, capacity, conduct or reputation that may impact your registration as a registered nurse? Yes ___ No ___ If yes, explain

IF ANSWERING "YES" TO QUESTIONS 1-9, PLEASE ATTACH AN EXPLANATION.



College of Registered Nurses of Nova Scotia – Registration Services
Application for Initial Nurse Practitioner Licence Part I

Page 4 of 4

Signature Declaration

By signing this application form:

I authorize the collection, use and disclosure of personal information concerning myself as described in the College of Registered Nurses of Nova Scotia (the College) Privacy of Member Information Policy. You can find this policy on the following webpage: <http://www.crnns.ca/default.asp?mn=414.1116.1137>.

In addition, I authorize the College to carry out the procedures necessary for the assessment of my eligibility for licensure. This includes making copies of my application documents for the purpose of assessment and/or contacting the institutions or authorities stated on this application to verify the authenticity of my documents and the information provided in my application. **This Signature Declaration allows the College to contact other regulatory bodies and obtain information pertinent to my application.** I agree that a copy of this *Signature Declaration* can be sent by the College to other regulatory bodies allowing them to release information to the College.

I declare that all of the information I have provided in my application is complete and truthful.

I understand that the College will immediately stop the assessment of my application and that my application will be cancelled, licensure will be refused, and I will be prohibited from applying to the College in the future if:

7. I have provided any inaccurate information; or
8. I have omitted required information; or
9. the College determines that any documents submitted during the application or assessment process have been altered, tampered with or forged.

This applies to all documents received during the application process including written correspondence. The College will not issue a refund and will retain all documents submitted with my application.

This Signature Declaration authorizes the College to share with other Canadian regulatory bodies that my application for licensure has been refused because of one of the three reasons listed above.

I understand that in order to practise as a nurse practitioner in Nova Scotia, I am required by law to hold a licence with the College, before I commence employment, including any orientation.

I understand that this application for assessment of eligibility for licensure will be considered lapsed when the Part I and application fee submitted to the College is more than 6 months old and I have not been in contact with the College for 6 months or more. Should my file lapse, I understand I will be required to submit a new application form, initial assessment fee and updated documentation, and that if I do not re-apply, my file documents will be securely destroyed five (5) years after the date they are considered lapsed.

I have read and understand the above and the information on this form and agree to the terms stated herein.

Print Name

Date

Signature of Applicant

Signature of Witness

Date



College of Registered Nurses – Registration Services
Part II: Verification Of Nurse Practitioner Education

Section A Applicant

Following completion of Section A, forward to the school of nursing requesting they complete Section B that verifies the nurse practitioner education program.

I, _____
(Please print) Given names Surname Birth/former name(s)
graduated from the _____ nurse practitioner education program
School/Institute
on _____
M/D/Y

Date _____ Signature of applicant _____

Section B: Verification of Nurse Practitioner Education Program

To be completed by the designated authority for the nurse practitioner education program. The completed form must be mailed **directly from the designated authority** to College of Registered Nurses of Nova Scotia at the address noted below.

This is to certify that the above named applicant was admitted to _____
School/Institute
nurse practitioner education program on _____ and completed the program on _____
M/D/Y M/D/Y
Certificate / Degree awarded: _____

The program of study was for the following client population:

Family/All Ages Adult Pediatric (child) Neonate

At the time the applicant completed the program, it was officially approved by _____
Regulating/accrediting authority

Name of designated authority (please print)

Signature of designated authority

Title

Mailing address

Mailing address

Telephone #/e-mail address

Date

SEAL

College of Registered Nurses of Nova Scotia – Registration Services
Suite 4005, 7071 Bayers Rd, Halifax NS, Canada B3J 2C2
Telephone: 1-902-491-9744, ext 239/225 Toll Free: 1-800-565-9744; Facsimile 1-902-491-9510
E-mail address: registration@cnrs.ca / Website: www.cnrs.ca



**College of Registered Nurses – Registration Services
Part III: Verification Of Nurse Practitioner Registration**

Section A: Applicant : Complete Section A and forward one copy to the jurisdiction where registration and licensure as a nurse practitioner was originally established requesting they verify your status by completing Section B. Forward another copy(ies) to all jurisdictions where you have been registered/licenced as a nurse practitioner requesting they verify your status by completing Section B.

I, _____
 Given names (please print) _____ Surname _____ Birth/former name(s) _____
 graduated from the _____ NP education program
 School/institute _____
 on _____, I established initial registration as an NP on _____
 M/D/Y
 under registration number _____.

Date: _____ **Signature of applicant:** _____

Section B: To be completed by the registering/licensing authority issuing **CURRENT and/or PREVIOUS** registration/licence. Please return completed application by mail directly to the College of Registered Nurses of Nova Scotia at the address noted below.

This is to certify that the above-named applicant graduated from _____
 Name of school of nursing/institution

Address _____

The program of study was for the following client population:

Family/All Ages Adult Pediatric (child) Neonate

The program was approved by _____ at the time of
 completion. Registering authority

Registration as a nurse practitioner was granted on _____ under Registration number _____
 M/D/Y

Licence was last issued on _____ Licence expires on _____
 M/D/Y M/D/Y

Is this nurse practitioner's licence currently under review or has it ever been subject to disciplinary action? _____
 If yes, please attach letter of explanation. Yes/no

 Name of designated authority (please print) _____ Signature of designated authority

 Title _____ Date

 Mailing address _____ Telephone #/e-mail address

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 Suite 4005, 7071 Bayers Rd, Halifax NS, Canada B3J 2C2
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 E-mail address: registration@crnns.ca / Website: www.crnns.ca

RN-001-0017



College of Registered Nurses
of Nova Scotia

College of Registered Nurses – Registration Services
Part IV: Referee Assessment Form

Section A – Applicant to complete Section A and forward form each of the two referees requesting completion of Section B.

Given names (please print) _____ Surname _____ Birth/former name(s) _____

Street/mailling address _____ City _____ Province/state _____ Postal code _____

Telephone # _____ E-mail address _____

Section B: For Referee

The above named applicant is applying for licensure as a nurse practitioner with the College of Registered Nurses of Nova Scotia (CRNNS). Please complete the following form in relation to the applicant's **employment as a nurse practitioner**. Attached are the CRNNS nurse practitioner core competencies for your review. Please return the completed form to the College at the address noted below. A response by mail or e-mail is acceptable, **no faxes please**. Thank you for your assistance.

This is to verify that _____
Name of Employee

was employed by _____
Name of Organization

_____ Mailing Address

between _____ and _____
Month/day/year Month/day/year

Position: _____ Total Hours Practised: _____

Eligible for re-hire: (If NO, please attach an explanation): YES/NO _____

General performance comments/concerns: _____

By completing this form I am confirming that:

1. the applicant demonstrated competence in the provision of nurse practitioner services while employed at my facility;
2. no professional, ethical and/or health problems have occurred to indicate a licence should not be issued; and
3. I recommend the applicant for licensure with the CRNNS as a nurse practitioner.

_____ Signature _____ Name (please print)

_____ Date _____ Telephone #/E-mail address _____ Position (please print)

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E-mail address: registration@crnns.ca Website: www.crnns.ca 05/12



Nurse Practitioner Core Competencies

COMPETENCY 1: Professional Role, Responsibility and Accountability Within their focus of practice, nurse practitioners:

Clinical Practice

- 1.1 Practise in accordance with federal and provincial legislation, professional and ethical standards, and policies relevant to nurse practitioner practice.
- 1.2 Understand how the nurse practitioner's scope of practice differs from that of a registered nurse—and how these differences affect their responsibilities and accountabilities when they assume the title and scope of practice of a nurse practitioner.
- 1.3 Apply knowledge of diversity, cultural competence, cultural safety and the determinants of health in their clinical practice.
- 1.4 Apply knowledge of development and life stages, pathophysiology, psychopathology, epidemiology, pharmacotherapeutics, environmental exposure, infectious diseases, behavioural sciences, demographics, and family processes in their clinical practice.
- 1.5 Apply knowledge of the clinical manifestations of normal health events, acute/emergent illness or injury, chronic disease, and comorbidities—including the effects of multiple etiologies—in their clinical practice.
- 1.6 Integrate the principles of resource allocation and cost-effectiveness into clinical decision-making.
- 1.7 Educate clients using relevant, theory-based and evidence-informed approaches to teach them about their health status and how they may best maintain, improve, recover or manage their health.
- 1.8 Promote safe client care by addressing potential or actual risks with clients, and taking steps to mitigate harm from potential or actual adverse events.
- 1.9 Disclose the facts of adverse events to clients and report adverse events to appropriate authorities, in keeping with relevant legislation and organizational policies.
- 1.10 Set up effective processes to receive and track test results, interventions, referrals, consultations and provide necessary follow-up.
- 1.11 Document clinical data, assessment findings, diagnoses, plans of care, clinical rationales, therapeutic interventions, and client responses in a timely and accurate manner (in written and/or electronic documents).
- 1.12 Adhere to federal and provincial legislation, policies and standards related to privacy, documentation and information management (this applies to verbal communication as well as written and electronic records).
- 1.13 Engage in ongoing professional development and accept personal responsibility for maintaining nurse practitioner competence.

Collaboration, Consultation and Referral

- 1.14 Establish collaborative relationships with physicians and other healthcare providers.
- 1.15 Consult with and/or refer clients to other healthcare providers when the client's condition is outside the nurse practitioner scope of practice or the individual nurse practitioner's competence.
- 1.16 Consult with and/or refer clients to a physician or other appropriate healthcare provider when the client's condition is unstable or could destabilize or deteriorate.
- 1.17 Consult with and/or refer clients to a physician or other appropriate healthcare provider when signs, symptoms, and/or test results suggest a previously undiagnosed systemic illness, obstruction of a vital organ, or systemic infection that threatens life, limb or senses.
- 1.18 Act as a consultant to, and accept referrals from, healthcare providers and community agencies (including those in non-healthcare sectors).
- 1.19 Collaborate with clients and other members of the healthcare team to provide and promote interprofessional person-centred care at the level of the individual, organization and system.
- 1.20 Collaborate with clients and other members of the healthcare team to lead and promote continuous quality improvement initiatives.

Research Within their focus of practice, nurse practitioners:

- 1.21 Engage in evidence-informed practice by critically appraising and applying relevant research findings, best-practice guidelines and theories.
- 1.22 Develop, apply and evaluate processes that facilitate the coordination of health services within the practice setting.
- 1.23 Identify and implement evidence-informed innovations for improving client care within their focus of practice.
- 1.24 Create and implement processes to identify, collect data on, and evaluate the outcomes of client care within their focus of practice.
- 1.25 Collaborate with other members of the healthcare team and/or the community to identify research opportunities and conduct and/or support research.

Leadership

- 1.26 Develop innovative approaches to improving health service delivery in their practice setting, and support others to do the same (by acting as a resource person, facilitator, educator and role model).
- 1.27 Act as a preceptor, mentor and coach to nursing colleagues, other members of the healthcare team and students.
- 1.28 Articulate the role of the nurse practitioner to clients, other healthcare providers, policymakers and the public.
- 1.29 Develop strategies with healthcare providers and employers to optimize the nurse practitioner role within the collaborative practice team, enhance the team's capacity and improve service delivery to clients.
- 1.30 Identify issues related to health-service delivery within their focus of practice and help develop, implement and evaluate strategies to address these issues.
- 1.31 Advocate for equitable access to healthcare services, quality therapeutic intervention, a navigable healthcare system, and policy decisions that support health and quality of life.
- 1.32 Advocate for and participate in creating an organizational culture and practice environment that supports excellence, collaborative practice, continuous learning and professional growth.

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Phone 902-491-9744, ext 239/225 Toll Free in Nova Scotia 1-800-565-9744 Fax 902-491-9510
E-mail address: registration@crnns.ca Website: www.crnns.ca

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- 1.33 Act as change agents by interpreting and disseminating knowledge through a variety of methods (i.e., presentations, informal discussions, development of best practice guidelines and policies, etc.).
- 1.34 Initiate, support and participate in developing, implementing and evaluating standards and practice guidelines, as well as quality assurance, education and research initiatives.
- 1.35 Initiate, support and participate in efforts to positively influence practice, health services and policy.
- 1.36 Apply advanced knowledge and skills in communication, negotiation, coalition building, change management and conflict-resolution (anticipate, analyze, deflect, manage and negotiate conflict).

COMPETENCY 2: Health Assessment and Diagnosis Within their focus of practice, nurse practitioners:

- 2.1 Perform comprehensive or focused health histories appropriate to clients' situations, including physical, mental, psychosocial, emotional, ethnic, cultural and spiritual dimensions of health.
- 2.2 Perform comprehensive or focused physical examinations, and identify and interpret normal and abnormal findings in light of clients' health histories and current symptoms.
- 2.3 Use and adapt assessment tools and techniques based on client needs, culture and stage of life.
- 2.4 Use clinical reasoning to synthesize information obtained from histories and physical examinations in order to formulate differential diagnoses.
- 2.5 Determine which investigations are needed based on differential diagnoses, client information, current available evidence, and best-practice guidelines.
- 2.6 Order and/or perform screening and diagnostic investigations and interpret results using evidence-informed clinical reasoning and critical inquiry.
- 2.7 Establish a preliminary or definitive diagnosis for acute and chronic diseases, disorders, injuries, and conditions.
- 2.8 Anticipate emergent, urgent and life-threatening situations.
- 2.9 Identify health needs based on clients' overall life situations and responses to the diagnosis/illness.
- 2.10 Discuss health assessment findings and/or diagnoses and health needs with clients, including prognoses and potential courses of action—tailoring the communication to clients' needs and responses.

COMPETENCY 3: Therapeutic Management Within their focus of practice, nurse practitioners:

- 3.1 Create an environment that allows them to communicate effectively with clients about diagnoses and evidence-informed treatments and/or therapeutic options.
- 3.2 Explore the implications of treatments and therapeutic options with clients while respecting clients' concerns and choices.
- 3.3 Initiate therapeutic interventions in collaboration with clients and other members of the healthcare team as appropriate.
- 3.4 Initiate interventions to stabilize clients in emergent, urgent and life-threatening situations.
- 3.5 Support, educate, coach and counsel clients regarding diagnoses, prognoses and self-management, including their personal responses to diseases, disorders, conditions, injuries, risk factors, lifestyle changes and therapeutic interventions.
- 3.6 Promote client confidence and ability to navigate the healthcare system and to identify and access necessary resources.
- 3.7 Coordinate and facilitate client care with other healthcare providers, agencies and community resources.
- 3.8 Perform invasive and non-invasive procedures to manage and/or prevent diseases, injuries, disorders or conditions.
- 3.9 Prescribe pharmacological and non-pharmacological therapy in accordance with provincial and federal standards and legislation. These therapies include—but are not limited to—medications, blood and blood products, medical gases, alternative therapies, health programs and services, and healthcare equipment and supplies.
- 3.10 Prescribe medications based on clients' health history, diseases, disorders, or conditions, as well as their individual circumstances and stage of life.
- 3.11 Use evidence and knowledge of pharmacodynamics and pharmacotherapy in prescribing and monitoring medication therapy.
- 3.12 Counsel clients on medication therapy, including the benefits, potential side effects, interactions, importance of adherence, and recommended follow-up.
- 3.13 Intervene with appropriate measures when use, misuse or abuse of medication or other substances could potentially have, or is actually having, a negative effect on clients' health and safety.
- 3.14 Provide clients with evidence-informed recommendations about the likely benefits and potential risks of complementary and alternative therapies, including potential interactions between natural health products and over-the-counter and/or prescription medications.
- 3.15 Analyze the effect of marketing strategies used to promote health products, health programs, medical devices, medications, and complementary and alternative therapies, and discuss with clients as appropriate.
- 3.16 Monitor, evaluate and revise the plan of care based on current evidence-informed practice and clients' goals, preferences, health status, responses to therapeutic interventions, and outcomes.

COMPETENCY 4: Health Promotion and Prevention of Illness and Injury Within their focus of practice, nurse practitioners:

- 4.1 Counsel and teach individuals and groups using the principles of health promotion, health protection and illness and injury prevention.
- 4.2 Identify, assess and critically analyze information from a variety of sources to determine trends and patterns that have health implications for individuals, groups, communities and populations.
- 4.3 Develop or take part in developing strategies to address trends and patterns that have health implications.
- 4.4 Initiate or take part in designing and implementing services/interventions for health screening, health promotion, health protection, and the prevention of injury, illness, disease and complications.
- 4.5 Initiate or take part in developing and implementing processes for evaluating health screening, health promotion, health protection and prevention strategies and programs.

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 Suite 4005, 7071 Bayers Rd, Halifax NS, Canada B3L 2C2
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 E-mail address: registration@cnns.ca Website: www.cnns.ca

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Appendix B5: Annual Application for Licence to Practice Nursing (Online Form) Both RNs and NPs



College of Registered Nurses of Nova Scotia

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Personal Data

First Name:	<input type="text" value="SONG"/>	*
Middle Name:	<input type="text"/>	
Surname:	<input type="text" value="PENG"/>	*
Address:	<input type="text" value="Apt 905 2060 Quingate Place"/>	*
Address2:	<input type="text"/>	
City/Town:	<input type="text" value="Halifax"/>	*
Province:	<input type="text" value="Nova Scotia"/>	*
Country:	<input type="text" value="CANADA"/>	
Postal Code:	<input type="text" value="B3L 4P7"/>	*
County(Within Nova Scotia):	<input type="text" value="Not Applicable"/>	
Home Phone:	<input type="text" value="9024793160"/>	* eg.9021234567
Business Phone:	<input type="text"/>	Ext: <input type="text"/>
Email:	<input type="text"/>	
Gender:	<input type="radio"/> M <input checked="" type="radio"/> F	*
Date of Birth:	<input type="text" value="07/08/2013"/>	*
Original Birth Surname:	<input type="text" value="Peng"/>	*
Former Name:	<input type="text"/>	

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Identify language(s) in which you currently have the ability to safely provide registered nursing services:

English

French

Other languages:

- | | | |
|----------------------------------------|-------------------------------------|-------------------------------------|
| <input type="checkbox"/> Afrikaans | <input type="checkbox"/> Amharic | <input type="checkbox"/> Arabic |
| <input type="checkbox"/> Bengali | <input type="checkbox"/> Cantonese | <input type="checkbox"/> Cebuano |
| <input type="checkbox"/> Chinese | <input type="checkbox"/> Creole | <input type="checkbox"/> Croatian |
| <input type="checkbox"/> Czech | <input type="checkbox"/> Dagaari | <input type="checkbox"/> Danish |
| <input type="checkbox"/> Dari | <input type="checkbox"/> Dutch | <input type="checkbox"/> Estonian |
| <input type="checkbox"/> Farsi | <input type="checkbox"/> Finnish | <input type="checkbox"/> Fokien |
| <input type="checkbox"/> Gaelic | <input type="checkbox"/> German | <input type="checkbox"/> Greek |
| <input type="checkbox"/> Hausa | <input type="checkbox"/> Hebrew | <input type="checkbox"/> Hiligaynon |
| <input type="checkbox"/> Hindi | <input type="checkbox"/> Hindi | <input type="checkbox"/> Hungarian |
| <input type="checkbox"/> Igbo | <input type="checkbox"/> Illicono | <input type="checkbox"/> Irish |
| <input type="checkbox"/> Italian | <input type="checkbox"/> Japanese | <input type="checkbox"/> Kan-Kanaey |
| <input type="checkbox"/> KANNADA | <input type="checkbox"/> Kikuyu | <input type="checkbox"/> Kiswahili |
| <input type="checkbox"/> Korean | <input type="checkbox"/> Krio | <input type="checkbox"/> Kusasi |
| <input type="checkbox"/> Lebanese | <input type="checkbox"/> Lithuanian | <input type="checkbox"/> Logbo |
| <input type="checkbox"/> Malay | <input type="checkbox"/> Malayalam | <input type="checkbox"/> Malcuy |
| <input type="checkbox"/> Maltese | <input type="checkbox"/> Mandarin | <input type="checkbox"/> Marathi |
| <input type="checkbox"/> Mende | <input type="checkbox"/> Mi'kmaq | <input type="checkbox"/> Nigerian |
| <input type="checkbox"/> Norwegian | <input type="checkbox"/> Persian | <input type="checkbox"/> Philipino |
| <input type="checkbox"/> Polish | <input type="checkbox"/> Portuguese | <input type="checkbox"/> Punjabi |
| <input type="checkbox"/> Romanian | <input type="checkbox"/> Russian | <input type="checkbox"/> SHONA |
| <input type="checkbox"/> Sign Language | <input type="checkbox"/> Sindhi | <input type="checkbox"/> Slovac |
| <input type="checkbox"/> Spanish | <input type="checkbox"/> Swedish | <input type="checkbox"/> Tagalog |
| <input type="checkbox"/> Taiwanese | <input type="checkbox"/> Tamil | <input type="checkbox"/> Telugu |
| <input type="checkbox"/> Thai | <input type="checkbox"/> Tigrinia | <input type="checkbox"/> Ukrainian |
| <input type="checkbox"/> Urdu | <input type="checkbox"/> Vietnamese | <input type="checkbox"/> Visayan |
| <input type="checkbox"/> Welsh | <input type="checkbox"/> Yoruba | <input type="checkbox"/> Zulu |

Please contact the College at registration@crnns.ca if the language(s) in which you are fluent does not appear on this list.



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Entry/Initial Nursing Education Preparation

Initial Education: *

Nursing School: *

Nursing School Not in List:
If your school is not listed in the drop down list above, please enter the name here.

School Address:

Year Graduated: *

Province or Country of Graduation: *

Other Education (Check highest education level achieved for each area) [More Information](#)

In Nursing (Post RN)*

- Certificate
- Baccalaureate
- Master
- Doctorate
- None of the above

Date:*

In Other than Nursing*

- Certificate
- Baccalaureate
- Master
- Doctorate
- None of the above

Date:*

Are You Enrolled In a University Program/Certificate In Nursing (Post RN)? *

- Not Enrolled
- Baccalaureate (full time)
- Master (full time)
- Doctorate (full time)
- Baccalaureate (part time)
- Master (part time)
- Doctorate (part time)
- Nurse Practitioner(full time)
- Nurse Practitioner(part time)
- Certificate(part time)
- Certificate(full time)

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Please indicate your current employment status:

- [Employed in nursing](#)
- [Employed in other than nursing](#)
- [Leave of absence](#)
- [Not employed](#)

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- Seeking Employment In Nursing
- Not Seeking Employment In Nursing

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Type of Leave:

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If choose “Employed in nursing”

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Are you employed in NS?*

Yes No

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Please indicate your present Nova Scotia employment status. [More information](#)

Regular Full-time ▾

Is this your preferred employment status? Yes No *

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Nova Scotia Nursing Employer

Name of Nursing Employer (Institution/Agency):

Employer Not in List:
If your employer is not listed in the drop down list above, please enter the name here.

Name of Manager:

DISTRICT HEALTH AUTHORITY (DHA)
Please indicate if your work location is in a **geographic** area of a specific district health authority. You do not have to be employed by that district health authority (e.g., you may be self-employed, working with a different employer such as the VON or a long-term care facility).

District Health Authority: * [More information](#)

Employer Email:

Employer Address:

City: *

County: *

Province:

Employer Postal:

Initial date of RN practice with primary employer:

* Yes No I am currently employed by more than one employer

Current Place of Employment [More Information](#)

- Hospital (General/Maternity/Children/Psychiatric)
- Home Care Agency
- Nursing Station (Outpost or Clinics)
- Rehabilitation/Convalescent Centre
- Physician's Office/Family Practice Unit
- Business/Industry/Occupational Health Office
- Self-Employed/Private Practice
- Other - Specify
- Mental Health Centre
- Community Health/Health Centre
- Nursing Home/Long Term Care
- Educational Institution
- Association/Government
- Private Nursing Agency/Private Duty
- Public Health Department/Agency

Position/Title [More Information](#)

- Staff Nurse/Community Health Nurse
- Director/Assistant Director
- Clinical Nurse Specialist
- Researcher
- Parish Nurse
- Other - Specify
- Chief Nursing Officer/Chief Executive Officer
- Manager/Assistant Manager/Coordinator
- Instructor/Professor/Educator
- Consultant
- Nurse Practitioner

Primary Area of Responsibility

- | | |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p>Direct Patient Care</p> <ul style="list-style-type: none"> <input type="radio"/> Medical Surgical <input type="radio"/> Psychiatric/Mental Health <input type="radio"/> Paediatrics <input type="radio"/> Maternal/Newborn <input type="radio"/> Geriatric/Long Term Care <input type="radio"/> Critical Care <input type="radio"/> Community Health <input type="radio"/> Ambulatory Care <input type="radio"/> Home Care <input type="radio"/> Occupational Health <input type="radio"/> Oncology <input type="radio"/> Perioperative/OR <input type="radio"/> Emergency Care <input type="radio"/> Rehabilitation <input type="radio"/> Several Clinical Areas <input type="radio"/> Public Health <input type="radio"/> Nephrology <input type="radio"/> Neuroscience <input type="radio"/> Cardiovascular <input type="radio"/> Orthopedic <input type="radio"/> Gastroenterology <input type="radio"/> Hospice/Palliative Care <input type="radio"/> PeriAnesthesia/RR <input type="radio"/> Other-Specify | <p>Administration</p> <ul style="list-style-type: none"> <input type="radio"/> Service <input type="radio"/> Education <input type="radio"/> Other-Specify <p>Education</p> <ul style="list-style-type: none"> <input type="radio"/> Teaching-students <input type="radio"/> Teaching-employees <input type="radio"/> Teaching-clients <input type="radio"/> Other-Specify <p>Research</p> <ul style="list-style-type: none"> <input type="radio"/> Nursing research only <input type="radio"/> Other-Specify |
|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|



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Record of Nursing Employment (last 5 licensure years)

Do not include vacation, sick time and leave of absence hours. You are required to maintain and retain a record of practice hours for a minimum of 5 years. Please email registration@cmns.ca if you wish to alter hours in previous years. [More Information](#)

Time Period	Name of Nursing Employer(s)	Province/Territory/State	Actual RN hours practised
Nov 1/12 - Oct 31/13	<input type="text"/>	N/A <input type="button" value="v"/>	<input type="text"/> *
Nov 1/11 - Oct 31/12	<input type="text"/>	N/A <input type="button" value="v"/>	<input type="text"/> *
Nov 1/10 - Oct 31/11	<input type="text"/>	N/A <input type="button" value="v"/>	<input type="text"/> *
Nov 1/09 - Oct 31/10	<input type="text"/>	N/A <input type="button" value="v"/>	<input type="text"/> *
Nov 1/08 - Oct 31/09	<input type="text"/>	N/A <input type="button" value="v"/>	<input type="text"/> *

Other Professional Licensure (e.g., registered psychiatric nurse; registered massage therapist; registered social worker)

Yes No Have you held a licence with any other regulatory body, **other than registered nursing** during the past 12 months? If yes, list below and ensure you provide a [verification of licensure](#) from each listed regulatory body. [More Information](#)

Profession	Licence Number	Jurisdiction	<input type="button" value="Add Row"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	

Retirement Year

This information does not commit you to a retirement year. It merely provides an estimate for Health Human Resources planning. [More Information](#)

When do you plan to retire: *

After retirement, do you intend to continue to work as a registered nurse? *

Yes No



Guide to completing the Application for Licence to Practise Nursing

Judicial/Disciplinary Information

- A member or an applicant for a licence who at any time:
a. has been charged with, pleaded guilty to, convicted or found to be guilty of any offence in or out of Canada that is inconsistent with the proper professional behaviour of a member;
b. has been found guilty of a disciplinary finding in another jurisdiction;
c. has had a licensing sanction imposed by another jurisdiction;
d. is the subject of an investigation or disciplinary process in any jurisdiction;
or
e. encounters a circumstance that would alter their answers to the questions asked on the Application for Initial Registration Assessment in Nova Scotia or the Application for Licence to Practise Nursing;
shall report the matter to the Executive Director immediately. More Information
1. Have you held a licence to practise nursing in Nova Scotia in either of the 2 licensure years preceding this application?
If no, you must provide a Criminal Record Check.
For more information, click here.
2. Have you ever been charged with, pleaded guilty to, been convicted of or found to be guilty of an offence in or out of Canada, for which you have not received a pardon?
3. Are you currently under investigation by any registration/licensing authority?
4. Have you ever been disciplined by a registration/licensing authority for any occupation/profession in or out of Canada?
5. Do you have any conditions and/or restrictions on any licence issued by any registration/licensing authority for any occupation/profession in or out of Canada?
6. Have you ever been denied or had revoked any registration, licence, or permit?
7. Were you ever disciplined by or expelled from any university or school of nursing?
8. Have you ever been suspended or terminated from any employment?
9. Is there, to your knowledge or belief, any event, circumstance or condition concerning your competence, character, capacity, conduct or reputation that may impact your ability to practice as a registered nurse?

Explanation (Requested if you answered yes to any of the above questions 2-9)

Empty text box for explanation

Continuing Competence Program

Every registered nurse applying for or renewing/reactivating a licence to practise nursing in Nova Scotia is required to complete the Continuing Competence Program (CCP) approved by the College's governing Council (i.e. the Building Your Profile™ self-assessment tool) or an equivalent tool that is based on the Standards of Practice for Registered Nurses and Code of Ethics. More Information

- I have completed the requirements of the Continuing Competence Program for 2013.

If you selected no, you will be issued a three-month active-practising licence providing you with an opportunity to meet this requirement (see Guide for more information).

Emergency Preparedness

- I wish to volunteer in the event of an emergency in Nova Scotia that requires quick recruitment of qualified registered nurses. More Information

I have specific education/skills in the following areas:

Table with columns: Area of Nursing, Adult, Pediatric, Neonatal, # Years' Experience, Are you currently working in this area of nursing? Rows include Emergency/Trauma/Triage, Critical Care/ICU/Ventilator Management, Operating Room/Recovery, Mental Health/Grief Management/Counseling, Burn Management, Long Term Care/Palliative Care, Public Health, Disaster Management Experience/Training/Psychosocial Response, and Other - Please indicate.

Consent

With your consent, information from this form, including your personal information, may be released by the College to third parties for research purposes, and purposes not identified in Section 3 of the College's Privacy of Member Information Policy.

Please Indicate below whether you consent to the release of this information. For further information regarding release of information, refer to the College's Privacy of Member Information Policy at website www.crnns.ca

- I consent to the release of my information.

Certification

I certify the information provided on this form is true and complete and that I meet the requirements for a current licence. I further agree, that I will immediately report to the College should anything occur while licensed as an RN that would alter my responses to any of the questions contained in this application.

By submitting this application form, I authorize the College to verify the information provided above, which may include contacting the employers, educational institutions or regulatory authorities cited in my application. In addition, I am consenting to the release of my personal information as set out in the College's Privacy of Member Information Policy at www.crnns.ca

By verifying that you are the person completing the application, you are verifying that the information provided is complete and true and that you agree that the data entered is correct.

Name: *

- I confirm that I am the person named above.*

Submit application and continue to payment page

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Appendix B6: Temporary Licence Application (Online Form) Both RNs and NPs

Please fill in the following form: (fields marked with a * are required fields)

Given Names: *

Surname: *

Address 1: *

Address 2:

City: *

Province:

Postal Code: *

Email: *

Phone: * (Please include area code)

Alt. Phone:

School of Nursing: *

Year of Graduation:

Province of Graduation:

Employer: *

Date Employment Starts: (Format: DD/MM/YYYY)

Judicial Questions

- * Yes No Have you ever been charged with, pleaded guilty to, been convicted of or found to be guilty of an offence in or out of Canada, for which you have not received a pardon?
- * Yes No Are you currently under investigation by any registration/licensing authority?
- * Yes No Do you currently hold a licence with another health profession other than nursing?
- * Yes No Have you ever been disciplined by a registration/licensing authority for any occupation/profession in or out of Canada, or do you have any conditions or restrictions on any licence that you currently hold?
- * Yes No Have you ever been denied or had revoked any registration, licence, or permit?
- * Yes No Were you ever disciplined by or expelled from any university or school of nursing?
- * Yes No Have you ever been suspended or terminated from any employment?
- * Yes No Is there, to your knowledge or belief, any event, circumstance or condition concerning your competence, character, capacity, conduct or reputation that may impact your practise as a nurse?

If you answered YES to any of the judicial questions, please include an explanation below.