EC2006-64
CORONERS ACT
CORONER FOR QUEENS COUNTY
APPOINTMENT

Under authority of subsection 2(1) of the Coroners Act R.S.P.E.I. 1988, Cap. C-25 Council appointed Dr. Sanjay Malhotra of Cornwall to serve at pleasure as Coroner for Queens County (vice Dr. Kenneth Coady, resigned), effective 14 February 2006.

Order-in-Council EC285/94 of 2 June 1994 is hereby rescinded.

EC2006-65
FRENCH LANGUAGE SERVICES ACT
ANNUAL REPORT
RECEIVED


EC2006-66
PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
JAMES W. HEWITT
(APPROVAL)

Pursuant to section 4 of the Prince Edward Island Lands Protection Act R.S.P.E.I. 1988, Cap. L-5 Council granted permission to James W. Hewitt of Dorval, Quebec to acquire an interest in a land holding of approximately two decimal seven one (2.71) acres of land in Lot 5, Prince County, Province of Prince Edward Island, being acquired from 100479 P.E.I. Inc. of Summerside, Prince Edward Island.
Pursuant to section 4 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Christopher Savin and Anna-Marie Savin-Moss, both of Georgetown, Ontario to acquire an interest in a land holding of approximately four decimal three one (4.31) acres of land in Lot 40, Kings County, Province of Prince Edward Island, being acquired from Wayne Carew of Breadalbane, Prince Edward Island.

Pursuant to section 4 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Gilbert Standen of Yonkers, New York to acquire a land holding of approximately fifty (50) acres of land in Lot 64, Kings County, Province of Prince Edward Island, being acquired from Jim Adams and Susan Mailler, both of Little Sands, Prince Edward Island.

Further, Council noted that the said land holding, being part of Provincial Property No. 295972, was previously identified for non-development use in accordance with section 2 of the Land Identification Regulations (EC606/95) made under the said Act. Identification continues to apply.

Pursuant to section 4 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to John Stiefel Jr. of Southington, Connecticut to acquire a land holding of approximately zero decimal seven seven (0.77) acres of land in Lot 17, Prince County, Province of Prince Edward Island, being acquired from the Estate of Helen Johnson of Kemptville, Ontario.
Pursuant to section 4 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to John Stiefel Jr. of Southington, Connecticut to acquire a land holding of approximately one hundred and thirteen decimal nine three (113.93) acres of land in Lot 17, Prince County, Province of Prince Edward Island, being acquired from the Estate of Helen Johnson of Kemptville, Ontario PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to 100729 P.E.I. Inc. of Winsloe, Prince Edward Island to acquire a land holding of approximately zero decimal five four (0.54) acres of land in Lot 33, Queens County, Province of Prince Edward Island, being acquired from Eddy Younker of Winsloe, Prince Edward Island.

Pursuant to section 5 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to 100729 P.E.I. Inc. of Winsloe, Prince Edward Island to acquire a land holding of approximately nine (9) acres of land in Lot 33, Queens County, Province of Prince Edward Island, being acquired from Eddy Younker and Lorna Younker, both of Winsloe, Prince Edward Island PROVIDED THAT approximately eight decimal two four (8.24) acres, being the part of the said real property that has not received subdivision approval, is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.
EXECUTIVE COUNCIL ___________________________ 14 FEBRUARY 2006

EC2006-73

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
100729 P.E.I. INC.
(APPROVAL)

Pursuant to section 5 of the Prince Edward Island Lands Protection Act R.S.P.E.I. 1988, Cap. L-5 Council granted permission to 100729 P.E.I. Inc. of Winsloe, Prince Edward Island to acquire a land holding of approximately one decimal nine two (1.92) acres of land in Lot 33, Queens County, Province of Prince Edward Island, being acquired from Eddy Younker and Lorna Younker, both of Winsloe, Prince Edward Island.

EC2006-74

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
AFFLECK FARMS LTD.
(APPROVAL)

Pursuant to section 5 of the Prince Edward Island Lands Protection Act R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Affleck Farms Ltd. of Central Bedeque, Prince Edward Island to acquire a land holding of approximately zero decimal six eight (0.68) acres of land in Lot 26, Prince County, Province of Prince Edward Island, being acquired from Robert Reid and Norma Reid, both of Summerside, Prince Edward Island.

EC2006-75

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
AFFLECK FARMS LTD.
(APPROVAL)

Pursuant to section 5 of the Prince Edward Island Lands Protection Act R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Affleck Farms Ltd. of Central Bedeque, Prince Edward Island to acquire a land holding of approximately fifty-six decimal six nine (56.69) acres of land in Lot 26, Prince County, Province of Prince Edward Island, being acquired from Robert Reid and Norma Reid, both of Summerside, Prince Edward Island.
Pursuant to section 5 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Hatton Farms Inc. of Midgell, Prince Edward Island to acquire a land holding of approximately ten decimal zero one (10.01) acres of land in Lot 40, Kings County, Province of Prince Edward Island, being acquired from Cletus L. Decoursey of Midgell, Prince Edward Island PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.

**EC2006-77**

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
HEWQUIP INC.
(APPROVAL)

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Hewquip Inc. of Pointe-Claire, Quebec to acquire a land holding of approximately two decimal seven one (2.71) acres of land in Lot 5, Prince County, Province of Prince Edward Island, being acquired from 100479 P.E.I. Inc. of Summerside, Prince Edward Island.

**EC2006-78**

PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
LABEL CONSTRUCTION LTD.
(APPROVAL)

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Label Construction Ltd. of Winsloe, Prince Edward Island to acquire a land holding of approximately two (2) acres of land at Charlottetown, Queens County, Province of Prince Edward Island, being acquired from Sambur Limited of Fredericton, New Brunswick.
Pursuant to section 5 and section 9 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to MacBeath Farms Ltd. of Marshfield, Prince Edward Island to acquire a land holding of approximately forty (40) acres of land in Lot 34, Queens County, Province of Prince Edward Island, being acquired from Arthur Ludlow Jenkins and Margaret Ann Jenkins, both of Marshfield, Prince Edward Island PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Monaghan Farms Ltd. of Grahams Road, Prince Edward Island to acquire a land holding of approximately thirty-one (31) acres of land in Lot 25, Prince County, Province of Prince Edward Island, being acquired from George M. Caseley & Sons Inc. of Kelvin Grove, Prince Edward Island PROVIDED THAT the said real property is identified for non-development use pursuant to the Land Identification Regulations (EC606/95) made under the said Act.

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act* R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Monaghan Farms Ltd. of Grahams Road, Prince Edward Island to acquire a land holding of approximately forty-nine (49) acres of land in Lot 25, Prince County, Province of Prince Edward Island, being acquired from George M. Caseley & Sons Inc. of Kelvin Grove, Prince Edward Island.

Further, Council noted that the said land holding, being Provincial Property No. 645143, was previously identified for non-development use in accordance with section 2 of the Land Identification Regulations (EC606/95) made under the said Act. Identification continues to apply.
EC2006-82
PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
MORLEY ANNEAR LTD.
(APPROVAL)

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act*
R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Morley Annear Ltd. of Montague, Prince Edward Island to acquire a land holding of approximately seven decimal four (7.4) acres of land in Lot 52, Kings County, Province of Prince Edward Island, being acquired from Orville MacDonald of Montague, Prince Edward Island.

EC2006-83
PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
PAN-AMERICAN TRUST COMPANY
(APPROVAL)

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act*
R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Pan-American Trust Company of Charlottetown, Prince Edward Island to acquire a land holding of approximately seventeen decimal seven two (17.72) acres of land in Lot 17, Prince County, Province of Prince Edward Island, being acquired from the Government of Prince Edward Island, as represented by the Minister of Transportation and Public Works of Charlottetown, Prince Edward Island.

EC2006-84
PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
PETITION TO ACQUIRE A LAND HOLDING
PMPOWERED CORPORATION
(APPROVAL)

Pursuant to section 5 of the *Prince Edward Island Lands Protection Act*
R.S.P.E.I. 1988, Cap. L-5 Council granted permission to PMPOWERED CORPORATION of Georgetown, Ontario to acquire a land holding of approximately four decimal three one (4.31) acres of land in Lot 40, Kings County, Province of Prince Edward Island, being acquired from Wayne Carew of Breadalbane, Prince Edward Island.
EC2006-85
PRINCE EDWARD ISLAND
LANDS PROTECTION ACT
APPLICATION TO LEASE LAND
MAPLE LILY FARMS INC.
(APPROVAL)

Pursuant to section 5 and clause 5.3(1)(b) of the Prince Edward Island Lands Protection Act R.S.P.E.I. 1988, Cap. L-5 Council granted permission to Maple Lily Farms Inc. of Springfield, Prince Edward Island to acquire, by lease, an interest in a land holding or land holdings of up to two hundred and forty-two decimal six (242.6) acres of land as part of the said corporation's aggregate land holdings PROVIDED THAT the said Maple Lily Farms Inc. files a statement with the Island Regulatory and Appeals Commission within one year of the date of this Order and prior to 31 December in every subsequent year disclosing the parcel number, the acreage and the term of lease for each parcel leased during the reporting period covered by the statement.

EC2006-86
NURSES ACT
DISCIPLINE REGULATIONS
REVOCATION

Pursuant to section 8 of the Nurses Act R.S.P.E.I. 1988, Cap. N-4, the Association made and the Lieutenant Governor in Council approved the following regulations:

1. The Nurses Act Discipline Regulations (EC504/89) are revoked.

2. These regulations come into force immediately before the expiry of February 24, 2006.

EXPLANATORY NOTES

These regulations revoke the Discipline Regulations made under the Nurses Act to prepare for the proclamation of the Registered Nurses Act and regulations to be made under that Act.

EC2006-87
NURSES ACT
REGISTRATION AND LICENSING OF NURSES
REGULATIONS
REVOCATION

Pursuant to section 8 of the Nurses Act R.S.P.E.I. 1988, Cap. N-4, the Association made and the Lieutenant Governor in Council approved the following regulations:

1. The Nurses Act Registration and Licensing of Nurses Regulations (EC583/86) are revoked.

2. These regulations come into force immediately before the expiry of February 24, 2006.
EXPLANATORY NOTES

These regulations revoke the Registration and Licensing of Nurses Regulations made under the Nurses Act to prepare for the proclamation of the Registered Nurses Act and regulations to be made under that Act.

EC2006-88

NURSES ACT
SCHOOLS OF NURSING REGULATIONS
REVOCATION

Pursuant to section 8 of the Nurses Act R.S.P.E.I. 1988, Cap. N-4, the Association made and the Lieutenant Governor in Council approved the following regulations:

1. The Nurses Act Schools of Nursing Regulations (EC264/97) are revoked.

2. These regulations come into force immediately before the expiry of February 24, 2006.

EXPLANATORY NOTES

These regulations revoke the Schools of Nursing Regulations made under the Nurses Act to prepare for the proclamation of the Registered Nurses Act and regulations to be made under that Act.

EC2006-89

POLICE ACT
PROVINCIAL POLICE CONSTABLE
APPOINTMENT

Pursuant to section 6 of the Police Act R.S.P.E.I. 1988, Cap. P-11 Council authorized the following person to exercise the powers of a provincial police constable:

<table>
<thead>
<tr>
<th>NAME</th>
<th>TERM OF APPOINTMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>Allan J. MacIsaac</td>
<td>14 February 2006 at pleasure</td>
</tr>
</tbody>
</table>

Further, Council ordered that, should the aforementioned person cease to be employed as a police officer with the Borden-Carleton Police Service, his appointment as a provincial police constable shall terminate coincident with the date his employment as a police officer with the Borden-Carleton Police Service is terminated.

EC2006-90

REGISTERED NURSES ACT
DECLARATION RE

REGISTERED NURSES ACT
NURSE PRACTITIONER REGULATIONS

Pursuant to section 35 of the Registered Nurses Act R.S.P.E.I.1988, Cap. R-8.1, the Lieutenant Governor in Council approved the following regulations made by the Association of Registered Nurses of Prince Edward Island:

1. In these regulations
   (b) “collaborating medical practitioner” means, in respect of a nurse practitioner, a medical practitioner who is, at the relevant time, participating in a collaborative working relationship with the nurse practitioner;
   (c) “Committee” means the Nurse Practitioner Diagnostic and Therapeutics Committee established under section 8;
   (d) “Pharmacy Board” means the Prince Edward Island Pharmacy Board established under section 6 of the Pharmacy Act, R.S.P.E.I. 1988, Cap. P-6;
   (e) “potentially life-threatening disease, disorder or condition” includes, in respect of a client, any disease, disorder or condition that causes the client to have or to demonstrate
      (i) any sign or symptom of an acute event that is potentially threatening to the life, limb, or senses of the client,
      (ii) any sign or symptom of the obstruction of any body system of the client,
      (iii) any sign of severe or widespread infection,
      (iv) a fever greater than 39 degrees Celsius, if the client is a child between 3 and 6 months of age with no identifiable focus of infection,
      (v) any sign or symptom of illness if the client is a child less than 3 months of age,
      (vi) any blunt, penetrating or other wound that may indicate damage below the fascia or functional impairment, or
      (vii) any sign or symptom of any fetal or maternal pregnancy risk factor;
   (f) “primary medical practitioner” means, in respect of a client, the medical practitioner who has primary responsibility for the care of the client;
   (g) “standards of practice” means, in respect of a nurse practitioner, the professional standards of practice for nurse practitioners that are established or adopted in the bylaws.

2. (1) A nurse practitioner’s endorsement on the license of a member authorizes the member, subject to the Act and these regulations, to engage in the practise of nurse practitioner from the date of the issuance of the endorsement and until the expiry date specified in the endorsement.
   (2) Where
      (a) a nurse practitioner’s license is revoked; or
      (b) a nurse practitioner dies and a notice of his or her death is received by the Registrar,
   the endorsement of the nurse practitioner is deemed to be revoked and the Registrar shall strike the name of the nurse practitioner from the record of endorsements required to be kept under subsection 15(2) of the Act.

3. (1) All applications for nurse practitioner’s endorsements shall
   (a) be made in writing in a form approved or provided by the Registrar;
   (b) be dated and signed by the applicant; and
(e) be addressed and delivered to the Registrar.

(2) Where an application states a fact and the application form or the Registrar requires that the fact shall be verified by a document submitted to the Registrar by a person other than the applicant, including a government, an institution of learning or a regulatory body, the Registrar may refuse to endorse the license of the applicant with a nurse practitioner’s endorsement until the document is submitted by that person to the Registrar.

(3) Where the Registrar has reasonable grounds to believe that a statement in an application or in a document submitted in support of an application is false, or that the application or document is not authentic, the Registrar may refuse to endorse the license of the applicant with a nurse practitioner’s endorsement until the statement, application or document has been verified by such procedure as the Registrar may determine.

4. An applicant for a nurse practitioner’s endorsement shall, if required by the Registrar, provide such information and proof as the Registrar may require to establish that the member has the qualifications and competence to engage in the practice of a nurse practitioner in a manner that is conducive to the protection of the public in the provision of the professional services of a nurse practitioner, failing which the Registrar shall not endorse the license of the applicant with a nurse practitioner’s endorsement.

5. (1) An applicant for a nurse practitioner’s endorsement under section 15 of the Act shall satisfy the Registrar that the applicant
   
   (a) is not, as of the date of application, subject to a discipline or professional conduct review penalty or proceeding in any jurisdiction;
   
   (b) has graduated from an educational program for nurse practitioners that
      (i) is recognized by the Council, and
      (ii) is offered by an approved school of nursing;
   
   (c) has, within the three years immediately preceding the date of the application,
      (i) lawfully practised as a nurse practitioner in Prince Edward Island or another province for a total of 1800 hours, or
      (ii) graduated from an educational program for nurse practitioners of a type described in clause (b),
   
   (d) has passed any nurse practitioner examination required by the Council, and
   
   (e) if required by the Council, has satisfactorily completed a competence assessment, taken at the applicant’s expense, to establish that the applicant is competent to practice as a nurse practitioner.

   (2) An applicant for a nurse practitioner’s endorsement is exempt from compliance with the requirements of clause (1)(c) if the applicant
   
   (a) has lawfully practised as a nurse practitioner in Prince Edward Island or another province for a total of 600 hours within the year immediately preceding the date of the application; or
   
   (b) has participated in the Beechwood Demonstration Project conducted by the Department of Health and Social Services in the Community of O’Leary in Prince Edward Island during 2004 and 2005.

(3) Subsection (2) and this subsection are repealed on October 31, 2007 and subsection (1) is amended by renumbering it as section 5.

6. (1) For greater certainty, and subject to subsection (2) and the standards of practice if any, the practice of a nurse practitioner consists of the following, in accordance with the collaborative working relationship with a collaborating medical practitioner:
   
   (a) the diagnosis or assessment of a disease, disorder or condition, and the communication of the diagnosis or assessment to the client;
   
   (b) the ordering of, and interpreting reports of, X-Rays concerning the following areas of the body of a client:
      (i) skeletal,
      (ii) abdomen,
(iii) chest or breast;
(c) the ordering of, and interpreting reports of, ultrasounds concerning the following areas of the body of a client:
   (i) abdomen,
   (ii) pelvis,
   (iii) breast;
(d) the ordering of, and interpreting of, laboratory tests and other screening and diagnostic tests;
(e) the ordering of, and interpreting reports of, electrocardiograms;
(f) the ordering of, and interpreting reports of, spirometry;
(g) the ordering of the application of forms of energy for therapeutic purposes, including the application of
   (i) TENS (transcutaneous electrical nerve stimulation),
   (ii) thermal energy, or
   (iii) therapeutic touch.

(2) Where a nurse practitioner is diagnosing or assessing a disease, disorder or condition of a client, the nurse practitioner shall, subject to subsection (3), consult with the primary medical practitioner of the client, as soon as is reasonable in the circumstances, if
(a) the client’s diagnosis or assessment is unclear to the nurse practitioner or beyond the scope of the nurse practitioner to determine;
(b) the client has or demonstrates
   (i) a persistent or recurring sign or symptom that cannot be attributed to an identifiable cause,
   (ii) a sign or symptom that suggests that the client has a previously undiagnosed chronic systemic illness,
   (iii) a symptom that suggests that the client has decreased or decreasing function in any vital organ or body system,
   (iv) a sign of a recurrent or persistent infection,
   (v) any atypical presentation of a common illness or unusual response to treatment,
   (vi) any sign or symptom of sexually transmitted disease in the client if the client is a child,
   (vii) any sign or symptom of a behavioural change that cannot be attributed to a specific cause, or
   (viii) any deviation from normal growth and development in the client if the client is an infant child;
(c) a diagnostic or screening test conducted on the client suggests that the client has
   (i) a previously undiagnosed chronic systemic illness, or
   (ii) a decreased or decreasing function in any vital organ or body system;
(d) the client has a potentially life-threatening disease, disorder or condition; or
(e) the client has a chronic condition, and the client has or demonstrates signs or symptoms, or a diagnostic or screening test indicates, that the chronic condition has destabilized.

(3) Where a nurse practitioner
(a) is required by subsection (2) to consult with the primary medical practitioner of a client; and
(b) is satisfied, after making one or more reasonable attempts to consult with the primary medical practitioner of the client, that the primary medical practitioner is unavailable for consultation, the nurse practitioner shall, notwithstanding anything to the contrary in subsection (2), consult with another medical practitioner about the health of the client, if it is not reasonable in the circumstances to make further attempts to consult with the primary medical practitioner.

(4) Where a nurse practitioner is of the opinion that a client’s health or safety is at immediate risk, the nurse practitioner may, without consulting with the primary medical practitioner of the client, transfer the care of the client to another medical practitioner or to a hospital.

7. (1) For greater certainty, in addition to the performance of the professional services referred to in subsection 6(1), a nurse practitioner may prescribe any drug or class of drugs that the nurse practitioner is authorized to prescribe by a written authorization issued to the nurse practitioner by the Minister under section 14.1 of the *Pharmacy Act*. 

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**Required consultation with a medical practitioner**

**Consultation where primary medical practitioner is unavailable**

**Transfers of clients at immediate risk**

**Prescription of drugs**
(2) A nurse practitioner who wishes to obtain a written authorization referred to in subsection (1) to prescribe certain drugs or classes of drugs shall apply to the Registrar for a written confirmation, addressed to the Minister from the Association, that the nurse practitioner has the necessary training and education to competently prescribe the drugs or classes of drugs specified in the confirmation.

(3) An applicant for a written confirmation referred to in subsection (2) shall provide to the Registrar

(a) a completed application in a form approved by the Registrar that indicates the drugs or classes of drugs which the applicant wishes to be authorized to prescribe; and

(b) such information or evidence as the Registrar may require to satisfy the Registrar that the applicant has the training and education to competently prescribe the drugs or classes of drugs specified in the application.

(4) On receipt of an application made under subsection (2), the Registrar shall review the application and determine whether, in the Registrar’s view, the applicant has the necessary training and education to competently prescribe the drugs or classes of drugs specified in the application.

(5) The Registrar shall, when making a determination under subsection (4), apply the Nurse Practitioner Medication Prescription Guidelines established by the Committee pursuant to subsection 8(6) for the assessment of applications by nurse practitioners under this section.

(6) Where the Registrar determines that an applicant has the necessary training and education to competently prescribe all or some of the drugs or classes of drugs specified in the application, the Registrar shall, on behalf of the Association,

(a) issue a written confirmation to the Minister in respect of the applicant that indicates the specific drugs or classes of drugs that the applicant has the necessary training and education to competently prescribe; and

(b) provide a copy of the written confirmation to the applicant.

(7) Where the Registrar determines that an applicant does not have the necessary training and education to competently prescribe all or some of the drugs or classes of drugs specified in the application, the Registrar shall provide to the applicant a written notice of that determination.

(8) Where the Minister, after receipt of a confirmation issued under subsection (6), issues a written authorization to a nurse practitioner under section 14.1 of the Pharmacy Act to provide prescriptions for any drugs or classes of drugs, the nurse practitioner shall not provide any prescription for a drug or class of drug referred to in the authorization until a copy of the authorization has been provided to

(a) the Registrar;

(b) the Pharmacy Board; and

(c) each of the nurse practitioner’s collaborating medical practitioners.

8. (1) There is hereby established a Nurse Practitioner Diagnostic and Therapeutics Committee.

(2) The Committee shall be composed of 6 members appointed by the Council of whom

(a) one member shall be a licensed member of the Association who is not a nurse practitioner and who is nominated by the Council;

(b) one member shall be, subject to subsection (3), a licensed member of the Association who is a nurse practitioner and who is nominated by the Council;

(c) one member shall be a member of the College of Physicians and Surgeons of Prince Edward Island who is nominated by the Council of the College of Physicians and Surgeons of Prince Edward Island;

(d) one member shall be a licensed pharmacist who is nominated by the Pharmacy Board from among its members;

(e) one member shall be a person who is knowledgeable in pharmacology and who is recommended by the Lieutenant Governor in Council; and

...
(f) one member shall be a licensed member of the Association who is recommended by the Lieutenant Governor in Council.

(3) The first member of the Committee appointed pursuant to clause (2)(b) shall be a licensed member of the Association who is not a nurse practitioner and shall be appointed to hold office for a term of three months.

(4) Subject to subsection (3) and (5), members of the Committee shall be appointed for a term of two years, and may be reappointed.

(5) Subject to subsection (3), on the first appointment of the members of the Committee
(a) one third of the members, or as nearly as may be, shall hold office for a term of three years;
(b) one third of the members, or as nearly as may be, shall hold office for a term of two years; and
(c) one third of the members, or as nearly as may be, shall hold office for a term of one year.

(6) The mandate of the Committee is to formulate, maintain and revise, the Nurse Practitioner Medication Prescription Guidelines to be used by the Registrar when assessing applications by nurse practitioners under section 7.

(7) The Committee may, from time to time, seek the advice of experts where the Committee deems such expert advice is required.

(8) The Council shall choose the chairperson of the Committee from among the members of the Committee who are members of the Association, and the chairperson shall call and preside over, and may vote at, meetings of the Committee.

(9) The Committee shall meet at least once a year and as requested by the Registrar or the Minister.

(10) Quorum of the Committee shall consist of a majority of the members of the Committee.

(11) Decisions shall be made at Committee meetings based on a majority vote, and in the event of a tie vote the decision favoured by the chairperson shall prevail.

(12) The Minister may seek and obtain advice from the Committee on matters concerning drugs or classes of drugs that may be prescribed by nurse practitioners.

9. Every nurse practitioner
(a) shall advise the Registrar immediately after the nurse practitioner, or the nurse practitioner’s collaborating medical practitioner, ends the collaborative working relationship; and
(b) shall advise the Registrar that he or she has entered into a new collaborative working relationship with another medical practitioner and provide the Registrar with the name of the new collaborating medical practitioner.

10. (1) Every nurse practitioner shall, each year and by the date required by the Registrar, provide to the Registrar a declaration, in a form approved by the Registrar, that is signed by the nurse practitioner and that
(a) verifies that the nurse practitioner has, during the term of the current endorsement of the nurse practitioner, consulted with a medical practitioner as and when required by section 6;
(b) indicates the ways in which the nurse practitioner and each of his or her collaborating medical practitioners have, during the term of the current endorsement of the nurse practitioner, engaged in a collaborative working relationship; and
(c) such other information as the Registrar may require.

(2) Where a member is a nurse practitioner and fails to provide a declaration to the Registrar in accordance with subsection (1), the Registrar shall refuse to issue a further nurse practitioner’s endorsement to that member until the declaration is provided to the Registrar.
(3) Where the Registrar has reasonable grounds to believe that a statement in a declaration provided under subsection (1) is false, the Registrar may refuse to issue a further nurse practitioner’s endorsement to the member until the information in the declaration is verified to the satisfaction of the Registrar.

11. These regulations come into force on February 25, 2006.

EXPLANATORY NOTES

SECTION 1 defines the terms used in these regulations.

SECTION 2 explains the authorization granted by an endorsement in the licensing of a member. The section also requires the Registrar to strike the name of the nurse practitioner from the record of endorsements in specified circumstances.

SECTION 3 describes the process to apply for a nurse practitioner’s endorsement and allows for the Registrar to require verification of application material.

SECTION 4 requires the applicant, if required by the Registrar, to provide proof and information to establish qualifications and competence.

SECTION 5 details the requirements for the endorsement of a nurse practitioner.

SECTION 6 details the scope of practice of a nurse practitioner.

SECTION 7 explains the process by which nurse practitioners obtain the authorization to prescribe drugs.

SECTION 8 describes the composition of the Diagnostic and Therapeutics Committee. This section also explains the mandate of the committee and provides for term of office of its members and their reappointment.

SECTION 9 describes the process to be followed upon the cessation of a collaborative working relationship between a nurse practitioner and a collaborative medical practitioner.

SECTION 10 requires the nurse practitioner to make an annual declaration verifying consultation with a medical practitioner. The section also allows the Registrar to refuse to issue an endorsement if the nurse practitioner fails to make an annual declaration.

SECTION 11 provides for the commencement of these regulations.

EC2006-92

REGISTERED NURSES ACT
PROFESSIONAL CONDUCT REVIEW REGULATIONS

Pursuant to section 35 of the Registered Nurses Act R.S.P.E.I. 1988, Cap. R-8.1, the Lieutenant Governor in Council approved the following regulations made by the Association of Registered Nurses of Prince Edward Island:

1. In these Regulations


(b) “appellant” means a member of the Association, or the holder of a permit issued by the Association, who appeals a decision of the Review Committee;
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(c) “Committee member” means a member of the Review Committee appointed under subsection 2(1);

(d) “complainant” means the person who files a complaint against a member of the Association;

(e) “investigator” means an investigator who investigates a complaint and includes an investigation panel;

(f) “mediation” or “mediation process” includes any method of alternative dispute resolution approved by the Council;

(g) “panel” means an investigation panel or a formal inquiry panel of the Review Committee;

(h) “public member” means a public member of the Review Committee as described in section 2;

(i) “registered nurse member” means a registered nurse who is a member of the Review Committee as described in section 2;

(j) “respondent” means a member of the Association, or the holder of a permit issued by the Association, who is the subject of a complaint.

2. (1) The Review Committee appointed by the Council under subsection 24(1) of the Act shall be comprised of the following members, all of whom may vote at meetings of the Committee:

(a) not less than seven registered nurses, one of whom shall be named as the chairperson;

(b) not less than two public members appointed to represent the public.

(2) The registered nurse members of the Committee shall have at least five years of experience in the practice of a registered nurse, and shall serve for such terms as may be determined by the Council.

(3) Notwithstanding any other provision of these regulations, the Council may substitute or replace any member of the Review Committee who is unable or unavailable to participate in a complaint proceeding, and the Council may appoint, reappoint, remove or replace a member of the Review Committee at any time.

(4) The chairperson of the Review Committee may delegate some or all of the chairperson’s responsibilities to one or more registered nurse members of the Committee.

(5) Where the chairperson of the Review Committee is unable to act, Council may select an acting chairperson from among the registered nurse members of the Committee.

(6) The failure of a public member to attend a meeting of the Review Committee shall not be construed to affect or restrict the Review Committee from exercising any powers or performing any duties under these regulations at that meeting.

3. (1) The Review Committee may act in panels, each panel consisting of at least three registered nurse members and at least one public member.

(2) The chairperson of the Review Committee shall select the members of an investigation panel in relation to every complaint referred to the Review Committee under subsection 28(1) of the Act.

(3) The term of office of the members of the Review Committee shall be three years, and shall be so arranged or adjusted as to ensure that there will not be a turn-over of more than four members in any year.

(4) A investigation panel may consider more than one complaint in relation to one or more respondents; incidents; or types of misconduct.

(5) A member of the Review Committee may not sit on the investigation panel and a formal inquiry panel for the same complaint.
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(6) Subject to subsection (5), the chairperson of the Review Committee may sit as a member of any panel.

4. An investigation panel of the Review Committee may investigate a complaint or retain an investigator to investigate a complaint.

5. (1) A person who files a complaint under section 25 of the Act shall
   (a) file the complaint on a form approved by the Council;
   (b) sign the complaint;
   (c) provide a description in such detail of the conduct which is the subject of the complaint as may be required by the Executive Director, including
      (i) the identity of the respondent;
      (ii) the date and location of any incident complained of; and
      (iii) the circumstances complained of.

   (2) Where a complaint does not comply with the requirements of subsection (1), the complaint shall be returned by the Executive Director to the complainant to correct the deficiencies, after which the complaint may be re-filed with the Executive Director.

6. (1) The Executive Director shall refer a complaint to the Review Committee pursuant to subsection 28(1) of the Act by delivering a copy of the complaint to the chairperson of the Review Committee.

   (2) Upon receiving a copy of the complaint under subsection (1), the chairperson of the Review Committee shall, within 10 business days, send a copy of the complaint to the respondent.

   (3) A complainant may not withdraw a complaint that has been received by the chairperson of the Review Committee without the consent of the Review Committee.

   (4) The respondent shall submit a written response to the complaint to the chairperson of the Review Committee within 10 business days of receiving the complaint, or within such longer period as the chairperson may allow in writing.

   (5) The written response of the respondent
      (a) shall state which allegations in the complaint, if any, are admitted and which allegations, if any, are denied; and
      (b) shall give a summary of the respondent’s version of the facts pertaining to the allegations in the complaint.

   (6) The chairperson of the Review Committee may forward a copy of a response of a respondent to the complainant.

   (7) The chairperson may forward to the members of the Review Committee copies of the complaint and any written response of the respondent prior to a meeting of the Review Committee.

   (8) The investigation of a complaint
      (a) may be commenced before the receipt of a written response from the respondent; and
      (b) is not invalid if a response is late or no response is received from the respondent.

7. The chairperson of the Review Committee shall refer the complaint and the response, if any, to an investigator pursuant to s.28(2) of the Act, (a) after receiving the respondent’s response; or (b) after the date fixed for the respondent to send a response, whichever is earlier.

8. (1) The Executive Director or the Review Committee may refer a complaint for mediation under subsection 27(1) of the Act except where the Executive Director or the Review Committee determines that
      (a) the health or safety of one or more individuals has been seriously jeopardized or compromised; or
      (b) that it is not in the public interest to refer the complaint to mediation.
(2) The Review Committee may establish procedures to be followed with respect to mediation, including procedures pertaining to the selection of a mediator.

(3) The complainant and the respondent shall disclose all relevant facts and documents to the mediator throughout the mediation process, and the mediator shall not disclose information received in the course of mediation to anyone, except

(a) a statement of facts agreed to by the complainant and the respondent for the purposes of reporting to the investigation panel at the conclusion of mediation; or
(b) a report to the investigation panel.

(4) Notwithstanding subsection (3),

(a) where the mediator determines that there may be evidence of criminal or other unlawful activity, the mediator shall report such evidence to the Review Committee; and
(b) the Review Committee may report such evidence to the appropriate police agency or licensing body.

(5) A successful mediation shall be concluded by a written agreement

(a) that includes all of the terms and conditions agreed to by the parties; and
(b) is signed by the complainant, the respondent and the mediator.

(6) The mediator shall submit the agreement referred to in subsection (5) to the investigation panel, and the investigation panel may

(a) accept the agreement and consider the complaint resolved; or
(b) accept the agreement and impose such additional sanctions as the panel considers necessary.

9. (1) Any of the following persons may act as an investigator pursuant to s.28(2) of the Act:

(a) the chairperson or a registered nurse member;
(b) a paid employee of, or person acting under a contract with, the Association;
(c) a member of the Association;
(d) the Executive Director; or
(e) any other person appointed by the chairperson of the Review Committee.

(2) An investigator shall

(a) interview the complainant to clarify and obtain details of the complaint and evidence relating to the complaint;
(b) interview the respondent who is the subject of the complaint to determine what aspects of the complaint are disputed, whether the respondent intends to oppose the complaint, and what evidence the respondent intends to adduce;
(c) determine whether the respondent has previously been the subject of a complaint or disciplinary action in this province or by a professional body in another jurisdiction;
(d) interview such other persons as may have personal knowledge in respect of the complaint to determine the general nature of their knowledge and their willingness to testify at a hearing of the Committee into the complaint;
(e) ascertain the existence of records that may be relevant to the complaint, review those records, and ascertain whether the production of certain records or certified copies from authorized custodians thereof at a formal inquiry is likely to be contested;
(f) take custody of original records where possible, and obtain copies of all other records which appear to be relevant to the complaint;
(g) ascertain the existence of any other evidence that may be relevant to the complaint and determine whether the evidence can be made available for a hearing of the Committee into the complaint; and
(h) notify the chairperson of the Review Committee if evidence of any other misconduct is discovered during the course of the investigation.

(3) If any other matter concerning the conduct of the respondent arises in the course of an investigation or inquiry, the Review Committee may consider the matter as an additional complaint, after the Review
Committee has given the respondent a sufficient opportunity to prepare a response to the further matter.

(4) Any person, including any employer, having records or information relevant to an investigation or inquiry shall cooperate with the investigator and permit the investigator to review or copy the records or information.

10. (1) An investigator shall complete a written investigation report summarizing the investigation and, in the case of an individual investigator, submit the report to the investigation panel.

(2) The investigation report referred to in subsection (1) shall include the following information:
   (a) a copy of the complaint;
   (b) a copy of the response, if any, of the respondent;
   (c) a list of potential witnesses together with a description of their roles related to the complaint and the nature of their evidence; and
   (d) a list and description of the documents and any other evidence which appear to be relevant to the complaint.

(3) The investigator shall send a copy of the investigation report to the respondent not later than 10 business days prior to a meeting of the investigation panel for the purpose of considering the report.

11. (1) The investigation panel shall conduct a meeting to consider the investigation report, and do one of the following:
   (a) determine that the conclusions of the investigation report could not reasonably support a finding of professional misconduct, conduct unbecoming the profession of nursing, incompetence, incapacity or lack of fitness to practice, as the case may be, and accordingly, that the complaint should be dismissed;
   (b) determine that the complaint does not involve conduct which is sufficiently serious to require a formal inquiry, and dismiss the complaint;
   (c) determine that the evidence disclosed by the investigation report could, if proved, support a finding of professional misconduct, conduct unbecoming the profession of nursing, incompetence, incapacity or lack of fitness to practice, as the case may be, and accordingly, that a formal complaint shall be delivered to the respondent relating to all or any part of the subject matter of the complaint, or any matter disclosed by the investigation; or
   (d) determine that mediation should be attempted, and refer the complaint to a mediator.

(2) The chairperson of the investigation panel shall give reasonable notice of the meeting to the respondent, complainant and investigator.

(3) The investigation panel may permit the respondent and the complainant to make submissions in person or in writing with respect to the investigator’s report at the investigation panel meeting.

(4) Unless the investigation panel decides otherwise, the investigator, if an individual, shall attend the meeting described in subsection (1) to explain or clarify the investigation report.

(5) The investigation panel shall not receive evidence or hear testimony at the meeting described in subsection (1).

(6) Following the meeting described in subsection (1), the investigation panel shall report its decision to Council.

12. (1) Where the Review Committee decides to conduct a formal inquiry into the complaint, the chairperson of the Review Committee shall
   (a) assume the role of chairperson of the formal inquiry panel, or appoint a chairperson from the registered nurse members;
   (b) select the members of the formal inquiry panel from the members of the Review Committee; and
   (c) appoint a person to adduce evidence during the formal inquiry, who may be the investigator of the complaint, a member of the Association, or a lawyer or other individual hired by the Association.
(2) The chairperson of the formal inquiry panel shall send a notice of hearing as required by this section to:
(a) the members of the formal inquiry panel;
(b) the complainant;
(c) the respondent;
(d) witnesses, as determined by the person appointed to adduce evidence;
(e) such other persons as the chairperson of the formal inquiry panel determines.

(3) A notice of hearing under subsection (2) shall:
(a) describe the conduct which will be the subject of the formal inquiry in sufficient detail, including reference to specific legislative provisions, where practicable, to identify the occurrence and give the respondent sufficient information upon which to prepare an answer or defence to the complaint; and
(b) specify the date, time and place scheduled for the commencement of the formal inquiry; and

(4) A notice referred to in these regulations shall be provided:
(a) to the respondent, in person or by certified mail; and
(b) to other persons, in person, by certified mail or by ordinary mail.

(5) Notice shall be effective if sent or delivered to the last address of a person for which the Registrar has a record.

(6) Unless the contrary is proved, a notice sent by certified or ordinary mail is deemed to have been received not later than three business days after its receipt by the postal authority.

(7) Unless otherwise specified by the Review Committee, notice of at least five business days is a sufficient period of notice for any purpose under these regulations.

(8) Where sufficient notice has not been given and is not waived, the meeting or inquiry shall be adjourned to permit proper notice to be given.

(9) Where the complainant, after being given notice in accordance with these regulations, does not appear at a meeting or inquiry held pursuant to these regulations, the Review Committee may dismiss the complaint.

13. (1) At least 10 business days prior to the commencement of the formal inquiry, the person appointed to adduce evidence shall provide to the respondent the following:
(a) a list of witnesses to be called at the formal inquiry;
(b) copies of all documents and any other evidence to be submitted at the formal inquiry that the respondent has not previously received.

(2) At least 10 business days prior to the commencement of the formal inquiry, the respondent and the complainant shall provide to the person appointed to adduce evidence the following:
(a) a list of any witnesses either intends to call at the formal inquiry;
(b) copies of all documents and any other evidence that either intends to submit at the formal inquiry.

14. (1) A formal inquiry panel may determine its own procedure for the conduct of a formal inquiry pursuant to section 30 of the Act, which may vary from complaint to complaint.

(2) The formal inquiry panel may:
(a) consider an agreed statement of facts or a joint submission on penalty instead of hearing evidence in relation to part or all of the allegations in the complaint; or
(b) require evidence to be adduced in addition to an agreed statement of facts or a joint submission.

(3) Unless the formal inquiry panel determines otherwise, evidence at a formal inquiry shall be sworn and presented:
(a) firstly by the person appointed to adduce evidence; and
(b) secondly by the respondent.

(4) The formal inquiry panel may adjourn the formal inquiry to allow additional evidence to be gathered or presented.
5. Any member of the formal inquiry panel may administer an oath pursuant to section 14 of the Evidence Act.

6. The formal inquiry panel may receive into evidence and rely upon a copy of any document instead of an original where the formal inquiry panel is satisfied that the copy is an accurate copy of the original.

15. (1) The respondent, the complainant and any other person who, in the opinion of the chairperson of the Review Committee, has knowledge of the complaint or the conduct being investigated are compellable witnesses in any proceedings related to a complaint.

(2) The chairperson of the Review Committee has the authority to issue subpoenas for the attendance of witnesses and production of documents at a formal inquiry.

(3) A subpoena issued under these regulations may be enforced as if the subpoena had been issued by the Supreme Court of Prince Edward Island.

16. (1) At the conclusion of a formal inquiry, the formal inquiry panel shall render its decision in writing, with reasons.

(2) The written decision of the formal inquiry panel shall be delivered to the Council, the respondent and the complainant forthwith, and the Council shall determine whether the decision shall be communicated to other persons or published.

17. (1) Where the chairperson of a meeting or inquiry held under these regulations determines that a notice has been given in accordance with these regulations, the meeting may proceed in the absence of any person to whom the notice was given.

(2) The chairperson holding a meeting or inquiry referred to in these regulations may adjourn the meeting or inquiry to a fixed date without providing further written notice to the persons in attendance at such meeting or inquiry.

(3) The receipt or sending of a document may be proved by the certificate of the person responsible for receiving or sending the document.

(4) A copy of any record of the Association in its custody that is certified as a copy by the Executive Director is sufficient proof of the original or of the copy in the custody of the Association.

(5) The Council may approve forms for use in connection with these regulations including
   (a) a form of complaint;
   (b) a form of notice in respect to a meeting; and
   (c) a form of notice of appeal.

18. (1) The Council shall, upon the receipt of a notice of appeal under subsection 34(2) of the Act, appoint an Appeals Committee comprised of a chairperson and at least two other registered nurse members of the Association with experience in professional conduct matters, and a representative of the public, each of whom may vote at appeal hearings and meetings of the committee.

(2) Notwithstanding subsection (1), the Council shall not appoint any person to the Appeals Committee who sat as a member of an investigation or formal inquiry panel respecting the complaint.

19. (1) The appellant shall date and sign a notice of appeal under subsection 34(2) of the Act and file the notice of appeal with the Executive Director, who shall
   (a) note the date of receipt on the notice of appeal; and
   (b) notify the chairperson of the Review Committee and the chairperson of the Appeals Committee that the notice of appeal has been filed.

(2) Upon receiving the notice of appeal, the chairperson of the Review Committee shall direct the chairperson of the formal inquiry panel cause the following to be prepared:
(a) a record of the formal inquiry, which shall include all documents and exhibits which were used, considered or created by the formal inquiry panel at the formal inquiry;
(b) a transcript of the formal inquiry.

(3) The chairperson of the formal inquiry panel shall deliver the record and the transcript referred to in subsection (2)
(a) to the chairperson of the Appeals Committee; and
(b) to the appellant,
within 60 business days of the filing of the notice of appeal, or within such additional time as the chairperson of the Appeals Committee may determine.

20. (1) The chairperson of the Appeals Committee shall notify the appellant and the chairperson of the formal inquiry panel of the time, date and place for the hearing of the appeal, at least 10 business days prior to the hearing.

(2) The appellant and the chairperson of the formal inquiry panel of the Review Committee may attend and be heard at an appeal hearing and may be represented by counsel.

(3) The chairperson of the Appeals Committee may permit other persons to attend an appeal hearing.

21. (1) The written decision of the Appeals Committee shall be provided to
(a) the Council;
(b) the appellant;
(c) the chairperson of the formal inquiry panel; and
(d) the chairperson of the Review Committee.

(2) The decision on the appeal shall be provided to the appellant by personal delivery or by registered mail.

(3) The Council may communicate the decision on the appeal to other persons or may allow the decision to be published.

22. Where the Council must agree upon some matter or act under these regulations, a resolution of the Council is sufficient to establish that the Council has agreed or acted.

23. (1) Subject to subsections (2) and (3), every person who obtains information in dealing with a complaint under these regulations shall keep that information confidential.

(2) Where a complaint has been made against a member, the Executive Director or the Registrar may, disclose the existence of the complaint on the inquiry of an employer or prospective employer of the member or of another professional regulatory body.

(3) The chairperson of the Review Committee may communicate evidence of criminal or other unlawful activity to the appropriate authorities, including law enforcement organizations and professional discipline bodies in other jurisdictions.

24. These regulations come into force on February 25, 2006.

EXPLANATORY NOTES

SECTION 1 is the definition section.

SECTION 2 deals with the membership of the Review Committee.

SECTION 3 provides for panels of the Review Committee and allows a panel to consider more than one complaint against more than one member of the Association.

SECTION 4 provides for an investigation of a complaint by an investigation panel or an investigator.
SECTION 5 deals with the delivery of a complaint and a response by the respondent.

SECTION 6 provides for the referral of the complaint to the Review Committee and a response by the respondent.

SECTION 7 provides for the referral of the complaint and response to an investigator.

SECTION 8 deals with mediation.

SECTION 9 deals with persons who make act as an investigator and the duties of an investigator.

SECTION 10 deals with an investigation report.

SECTION 11 deals with a meeting to consider the investigation report and provides for submissions to the meeting by the respondent and complainant.

SECTION 12 provides for the chairperson and members of a formal inquiry panel. The section also deals with a notice of hearing and contents of the notice and how the notice is delivered.

SECTION 13 deals with providing a list of witnesses and documents.

SECTION 14 allows a formal inquiry panel to determine its own procedure and with evidence matters.

SECTION 15 deals with witnesses and subpoenas.

SECTION 16 deals with the decision of the formal inquiry panel.

SECTION 17 deals with proceeding in the absence of a person who received notice of a hearing and the certification of a copy of a record in the custody of the Association.

SECTION 18 deals with the appointment of an Appeals Committee.

SECTION 19 deals with the notice of appeal and the record and transcript of the formal inquiry.

SECTION 20 deals with notice of the appeal hearing and who may attend.

SECTION 21 deals with the decision of the Appeals Committee.

SECTION 22 deals with resolutions of the Council.

SECTION 23 deals with disclosure of complaints or of possible criminal activity.

SECTION 24 is the commencement of these regulations.

**EC2006-93**

**REGISTERED NURSES ACT**

**REGISTRATION AND LICENSING OF NURSES REGULATIONS**

Pursuant to section 35 of the Registered Nurses Act R.S.P.E.I. 1988, Cap. R-8.1, the Lieutenant Governor in Council approved the following regulations made by the Association of Registered Nurses of Prince Edward Island:

1. In these regulations Definitions
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(b) “CRNE” means the Canadian Registered Nurses Examination held under the auspices of the Canadian Nurses Association;

(c) “former Act” means the Nurses Act R.S.P.E.I.1988, Cap. N-4;

(d) “licensed member” means a member who holds a license or who is deemed under these regulations to hold a license.

INITIAL MEMBERSHIP AND LICENSE HOLDERS

2. Every person who, immediately before the date this section comes into force, is a member of the Association of Nurses of Prince Edward Island, is deemed on the date this section comes into force,

(a) to be a member of the Association of Registered Nurses of Prince Edward Island and to be registered as a member under the Act and these regulations until the person ceases to be registered under the Act and these regulations; and

(b) if the person holds a license under the former Act immediately before the date this section comes into force, to hold a license under the Act and these regulations until October 31, 2006, unless the license that is deemed to be held is sooner revoked under the Act or these regulations.

REGISTRATION

3. (1) An applicant for registration as a member pursuant to section 13 of the Act shall provide to the Registrar

(a) a completed application in a form approved by the Executive Director of the Association;

(b) proof of identification acceptable to the Registrar;

(c) a criminal record check concerning the applicant that has been issued within a month prior to the date of the submission of the completed application form referred to in clause (a);

(d) a statement from the relevant regulatory body of another jurisdiction indicating whether the applicant

(i) is suspended or is otherwise restricted in or disqualified from practising nursing in that jurisdiction by reason of illness, incapacity, professional misconduct, dishonesty or incompetence, or

(ii) is involved in a pending or ongoing discipline or professional conduct proceeding in that jurisdiction that has not been completed;

(e) such information as the Registrar may require concerning any matter referred to in clause (d); and

(f) such information and evidence as the Registrar may require to satisfy the Registrar that the applicant complies with or has the requirements and qualifications for registration that are set out in subsection 13(1) of the Act and in these regulations.

(2) An applicant for registration or a member shall be deemed not to have satisfied the requirements for registration if the applicant or member made a false or misleading statement or representation in respect of any application, statement, information or evidence provided to the Registrar pursuant to subsection (1).

(3) The Registrar may

(a) refer an application for registration to a committee established by the Council; or

(b) refer the application to the Council, whether or not the Registrar has referred the application to a committee pursuant to clause (a).

4. (1) Unless the Council directs otherwise, the Registrar shall deny or refuse any application for registration that is not completed within two years of the date the applicant submitted to the Registrar the completed application form referred to in clause 3(1)(a).

(2) The Registrar may destroy the application and the supporting documentation of an applicant if the applicant has not completed the
5. Where the Registrar has reasonable grounds to believe that a statement in an application or a document is false, or that the application or document is not authentic, the Registrar may refuse to register the person until the statement, application or document has been verified by such procedure as the Registrar may determine.

6. (1) An applicant for registration shall
(a) have graduated from an approved school of nursing within the five years immediately preceding the date the applicant submitted to the Registrar the completed application form referred to in clause 3(1)(a); or
(b) have lawfully practised and been employed as a registered nurse in another jurisdiction for a total of 1125 hours within the five year period referred to in clause (a).

(2) An applicant for registration shall
(a) have taken and passed the theoretical and clinical components of the following subjects at a school of nursing, if the applicant has not graduated from an approved school of nursing:
   (i) medical nursing,
   (ii) obstetrical nursing,
   (iii) paediatric nursing,
   (iv) psychiatric nursing,
   (v) surgical nursing; and
(b) have taken and passed all of the subjects offered at a school of nursing which Council has determined are prerequisites to registration.

(3) Subject to subsection (5), an applicant for registration shall
(a) have been registered and licensed, prior to August 1, 1970, as a registered nurse in another province; or
(b) have taken and passed the CRNE.

(4) Where
(a) an applicant has not taken and passed the CRNE; and
(b) the Canadian Nurses Association does not offer CRNE, the Council may approve or adopt, by resolution, a substitute examination for the applicant in the subjects the Council considers appropriate and establish a minimum standard that the applicant shall attain in the examination to qualify for the exemption provided by subsection (5).

(5) An applicant is exempt from compliance with subsection (3) if the applicant
(a) takes a substitute examination approved or adopted by the Council pursuant to subsection (4); and
(b) obtains or exceeds the minimum standard for the substitute examination that is established by the Council under subsection (4).

(6) An applicant for registration who
(a) does not meet the requirements of subsection (3); and
(b) is not exempt under subsection (5) from compliance with subsection (3), shall apply in writing to the Registrar to take the CRNE.

(7) An applicant for registration who applies to the Registrar to take the CRNE may not take the CRNE unless the Registrar is satisfied that the applicant satisfies or has all of the other requirements and qualifications for registration that are set out in subsection 13(1) of the Act and in these regulations.

(8) The Registrar shall notify any applicant for registration who writes the CRNE of the results obtained by the applicant on the CRNE as soon as possible after the results are known.

(9) A person who, on three consecutive attempts, 
(a) fails the CRNE; or
(b) fails to meet the minimum standard set by the Council for the CRNE or for a substitute examination referred to in subsection (5),
may not write the same category of examination again unless the person first takes the basic nursing education program offered by an approved school of nursing.

7. Where the first language of an applicant for registration is a language other than English, the applicant shall, before he or she may be registered, pass one or more English language proficiency tests, as required by the Council, with the minimum score determined by the Council.

8. (1) Subject to subsection (2), an applicant for registration shall not have been found guilty of a criminal offence or an offence under the Controlled Drugs and Substances Act (Canada) or the Food and Drugs Act (Canada).

(2) The Council may, on application, exempt an applicant for registration who has been found guilty of a criminal or other offence referred to in subsection (1) from the restriction in that subsection where the Council is satisfied that the offence is not of such a nature and direct relevance to practice that the applicant would pose a danger to clients if registered and allowed to practice.

9. (1) The Registrar shall, when entering an applicant in the Register as a member, (a) enter the name of the member as it appears on the application form submitted pursuant to subsection 3(1); and (b) assign to the member a unique registration number and enter the number in the Register.

(2) Where a member notifies the Registrar that the name in which the member practises as a registered nurse has changed to a different name and provides such proof of the lawful use of the different name as the Registrar considers sufficient, the Registrar (a) shall enter the new name of the member in the Register together with the date on which notice of the new name was provided to the Registrar; and (b) shall not remove the previous name of the member from the Register.

(3) A member shall not engage in the practise of a registered nurse under a name that is different from the name last entered in the Register for the member.

(4) Where (a) the Review Committee dismisses a member from the Association and revokes the member’s registration; or (b) a member dies and a notice of the death is received by the Registrar, the Registrar shall strike the member’s name from the Register.

LICENSES

10. (1) A license authorizes the person who holds the license to engage in the practice of a registered nurse only from its date of issue and until the expiry date stated in the license.

(2) A license is issued validly if the license bears a date of issuance and the Registrar has signed it, and a license that purports to be signed by the Registrar is not invalid merely because the signature is reproduced mechanically or by a stamp, unless the contrary is proved.

(3) The Registrar shall keep, or cause to be kept, a record of all licenses issued.

(4) Where (a) the Review Committee revokes the license of a member under section 31 of the Act; (b) a member dies and a notice of the death is received by the Registrar, the Registrar shall strike the member’s name from the record required to be kept under subsection (3).

11. (1) All applications for licenses shall
(a) be made in writing in a form approved or provided by the Registrar;
(b) be dated and signed by the applicant; and
(c) be addressed and delivered to the Registrar.

(2) Where an application states a fact and the application form or the Registrar requires that the fact shall be verified by a document submitted to the Registrar by a person other than the applicant, including a government, an institution of learning or a regulatory body, the Registrar may refuse to issue a license to the applicant until the document is submitted by that person to the Registrar.

(3) Where the Registrar has reasonable grounds to believe that a statement in an application or in a document submitted in support of an application is false, or that the application or document is not authentic, the Registrar may refuse to issue a license to the applicant until the statement, application or document has been verified by such procedure as the Registrar may determine.

12. (1) The Council may require an applicant for a license to provide evidence, as determined by the Council, to establish that the applicant is competent to be issued a license, and the Council may direct an applicant to take further education and examinations.

(2) A member who applies for a license shall provide such information and proof as the Registrar may require to establish that the member has the qualifications and competence to practice the profession in a manner that is conducive to the protection of the public in the provision of the professional services of a registered nurse failing which the Registrar shall not issue a license to the applicant.

13. (1) A member who applies for a license shall provide such information or evidence as the Registrar may require to establish that the member is not, as of the date of the application, or as of the date when the member would otherwise qualify for a license, a person who is the subject in any jurisdiction of an investigation or proceeding, or who was prior to that time the subject of an investigation or proceeding, in respect of an act that relates to the member’s practice as a registered nurse in any jurisdiction or that is derogatory to the honour and dignity of the profession and which, in either case, could have, or has, resulted in a sanction imposed by a proper authority.

(2) Where a member who applies for a license is a person who was, prior to the date of the application, the subject of an investigation or proceeding in any jurisdiction in respect to an act referred to in subsection (1) and the member discloses the existence of the investigation or proceeding and the sanction imposed, if any, in the application, the Registrar may issue the license applied for if the Registrar is satisfied that
(a) no sanction was imposed on the member as a result of the investigation or proceeding; or
(b) the Council, with knowledge of the investigation or proceeding and the sanction imposed, if any, has determined that the member is fit to practice and has approved the issuance of a license notwithstanding the investigation or proceeding and the sanction.

14. (1) A licensed member shall apply for a new license at least two weeks before the expiry of the current license that the licensed member holds or is deemed to hold.

(2) Where an application for a license is made
(a) by a licensed member within two weeks of the expiry of the current license that the licensed member holds or is deemed to hold; or
(b) by a member after the expiry of the last license that the member held or was deemed to have held, the licensed member or member, as the case may be, is liable to pay and shall submit to the Registrar, together with his or her application, the late fee established by the bylaws.

15. (1) On receipt of an application by a licensed member for a new license, the Registrar may not issue the new license to a licensed member
unless the member establishes to the Registrar’s satisfaction that the member has, within the five years immediately preceding the date the application is submitted to the Registrar, (a) lawfully practised as a registered nurse in any jurisdiction for a cumulative total of 1125 hours;  
(b) has successfully completed a refresher course in nursing that is established or approved by the Council under subsection (2); or 
(c) has graduated from an approved school of nursing.

(2) For the purposes of clause (1)(b), the Council shall, by resolution, 
(a) establish a refresher course in nursing; or 
(b) approve as a refresher course in nursing such course that the Council considers appropriate that is offered by a professional organization, university or other person.

(3) When establishing a refresher course in nursing, the Council may 
(a) establish the content of the refresher course; 
(b) determine the fee for the course and to whom the fee shall be paid; 
(c) establish a method of assessment for the successful completion of the refresher course; 
(d) establish a minimum standard for the successful completion of the refresher course; 
(e) determine when a refresher course will be conducted; 
(f) determine who may be a participant in the refresher course; and 
(g) determine who will instruct participants in the refresher course and who will assess their performance.

16. (1) The Council shall, for the purpose of maintaining the nursing competence of all licensed members, establish, by resolution, a continuing competence program that promotes the enhancement and application of the knowledge, skills, judgement and personal attributes required for safe, ethical nursing practice in a specific role and setting.

(2) The Registrar shall provide a copy of the details and requirements of the continuing competence program to a member on the website of the Association.

(3) Unless exempted by the Registrar, every licensed member shall, during the term of the license, comply with or fulfill the requirements of the continuing competence program established under subsection (1).

(4) The Registrar may, before issuing a new license to a licensed member, require the licensed member to provide documentation or evidence satisfactory to the Registrar that indicates that the licensed member has complied with or fulfilled the requirements of the continuing competence program during the term of the licensed member’s current license.

(5) Every licensed member who is required by the Registrar to provide documentation or evidence of compliance with the continuing competence program under subsection (4) shall provide such documentation or evidence prior to making an application for a new license.

(6) Where a licensed member applies for a new license and the licensed member 
(a) has been required by the Registrar to provide documentation or evidence of compliance with the continuing competence program under subsection (4) and 
(b) has failed to provide that documentation or evidence to the Registrar as required by subsection (5), the Registrar shall, if the licensed member meets the other requirements of the Act and these regulations, issue a temporary license to the member for a term not exceeding 90 days for the purpose of permitting the member to provide the documentation or evidence of compliance required by the Registrar.

(7) Where a member who is issued a temporary license under subsection (6) fails to provide the documentation or evidence of compliance with the continuing competence program required by the Registrar during the term of the temporary license, the Registrar may not,
subject to the other requirements of the Act and these regulations, issue a further license to the member until the member provides the documentation or evidence of compliance required by the Registrar.

RECORDS AND DOCUMENTS

17. Records and documents relating to an application for registration or a license are confidential and shall not be disclosed to any person other than the following, unless Council authorizes such disclosure:
   (a) the applicant;
   (b) an employee, officer or Council member of the Association, acting in the course of their authority;
   (c) a member of the Review Committee, when acting as such in relation to the applicant;
   (d) participants in a legal proceeding involving the member and the Association; and
   (e) legal counsel to the Association.

APPLICATIONS OUTSTANDING

18. These regulations apply in respect of an application for registration, or for a license, that was commenced under the former Act and that has not, as of immediately before the date this section comes into force, been granted or refused.

PERMITS

19. (1) The minimum qualifications referred to in clause 17(1)(b) of the Act that an applicant shall have to be issued a permit are the qualifications required for compliance with the following provisions:
   (a) clause 3(1)(d) of these regulations in which the statement provided from the other jurisdiction indicates that the applicant
      (i) is not suspended, restricted or disqualified, and
      (ii) is not involved in a pending proceeding within the meaning of clause 3(1)(d);
   (b) subsection 6(1) of these regulations;
   (c) subclause 13(1)(a)(ii) of the Act;
   (d) clause 13(1)(c) of the Act.

   (2) The Registrar shall indicate when a permit expires in the record of permits issued that is required to be kept by the Registrar under subsection 17(3) of the Act.

   (3) Subsection 10(4) applies, with such changes as are necessary, in respect of the revocation of a permit or the death of a member who holds a permit.

20. These regulations come into force on February 25, 2006.

EXPLANATORY NOTES

SECTION 1 defines the terms used in these regulations.

SECTION 2 states that persons who are members of the Association prior to the commencement of these regulations and who hold licenses under the former Act continue to be licensed and registered members upon the commencement of these regulations.

SECTION 3 lists the information that applicants for registration with the Association are required to provide. The section also invalidates any registration involving a false or misleading statement by the applicant and allows for the referral of applications to the Council or a committee.

SECTION 4 allows for the denial or refusal of incomplete applications and the destruction of any application materials that have been submitted in respect of incomplete applications.

SECTION 5 enables the Registrar to refuse to register an applicant until the verification of statements, applications or documents submitted in support of an application for registration.
SECTION 6 lists the educational qualifications and practical experience required of applicants for registration. The section also describes how registration applicants must apply to take the CRNE, and the section allows the Council to approve of a substitute examination where the CRNE is not offered.

SECTION 7 requires a registration applicant whose first language is other than English to take and pass an English language proficiency test.

SECTION 8 bars a person who has been found guilty of specific offences from being registered as a member of the Association unless the Council exempts such a person because the offence committed does not indicate that the person poses a danger to clients if allowed to practice.

SECTION 9 describes the process the Registrar must follow to register an applicant as a member and to recognize the change of the name of a member. It also indicates when the Registrar must strike the name of a member from the Register.

SECTION 10 describes the duration of a license and explains that a license is not invalid merely because the Registrar’s signature is reproduced. The section also requires the Registrar to maintain a record of licenses issued and indicates when the Registrar must strike a member’s name from this record of licenses.

SECTION 11 requires the applicant to apply for a license in writing. The section also allows the Registrar to require verification of statements and documents submitted in support of an application. The Registrar may refuse the issuance of a license until statements and documents are verified.

SECTION 12 allows the Council to require evidence of competence from the applicant.

SECTION 13 requires an applicant for a license to establish that the applicant is not subject to an investigation elsewhere. The section also allows the Registrar, in specified circumstances, to issue a license to an applicant who was subject to an investigation elsewhere.

SECTION 14 describes the process a licensed member must follow to renew a license.

SECTION 15 establishes the required practice hours and refresher course requirements that applicants applying to renew a license must comply with. The section also allows the Council to establish a refresher course.

SECTION 16 requires the Council to establish a continuing competence program which all licensed members are required to comply with. Licensed members may be required to provide documentation or evidence indicating that they have complied with the requirements of the program.

SECTION 17 states that records and documents relating to application for registration are to remain confidential unless Council authorizes disclosure. Council is authorized to disclose records or documents only to specific parties.

SECTION 18 indicates that these regulations apply to applications for registration or licensing outstanding under the former Act on the commencement of these regulations.

SECTION 19 states the minimum qualifications for a permit and requires the Registrar to record the expiry date of a permit.

SECTION 20 provides for the commencement of these regulations.
EC2006-94
REGISTERED NURSES ACT
SCHOOLS OF NURSING REGULATIONS

Pursuant to section 35 of the Registered Nurses Act R.S.P.E.I.1988, Cap. R-8.1, the Lieutenant Governor in Council approved the following regulations made by the Association:

1. In these regulations

   (a) “clinical nursing instructor” means a nursing instructor who is not a faculty member of a school of nursing but who supports the work of the school of nursing through clinical and lab assignments;

   (b) “conceptual framework” means, in respect of a curriculum for a program, the major concepts which provide the foundation for the curriculum;

   (c) “curriculum” means all planned didactic and clinical educational experiences included in a program;

   (d) “dean of nursing” means the administrative head of a program;

   (e) “entry level competencies” means the combined knowledge, skills, attitudes and judgments expected of a nurse beginning to practice;

   (f) “faculty member” means a member who holds a tenured, probationary, or term appointment at a school of nursing at the rank of professor, associate professor, assistant professor or lecturer;

   (g) “indicator” means an example of an activity that demonstrates how a standard may be applied;

   (h) “instructional staff” means the faculty members and clinical teaching staff of a school of nursing;

   (i) “mission” means, in respect of a program, a statement of purpose defining the unique nature and scope of the nursing program;

   (j) “program” means a nursing education program that prepares candidates for registration as members;

   (k) “school of nursing” or “school” means an organization or part of an educational institution which provides a program.

STANDARDS

2. The qualifications required for a dean of nursing, in respect of the approval of the school of nursing under section 20 of the Act, are those set out in Schedule A to these regulations.

3. (1) The qualifications required for a member of the instructional staff of a school of nursing, in respect of the approval of the school of nursing under section 20 of the Act, are those set out in Schedule B to these regulations.

   (2) Where a dean of nursing of a school in the province is unable to hire a person as a member of the school’s instructional staff who possesses all the qualifications required by Schedule B, the dean of nursing may, after consultation with the Executive Director, hire a registered nurse who does not possess all of those qualifications as a member of the school’s instructional staff, if the Executive Director is satisfied that

      (a) the dean of nursing has made reasonable efforts to recruit a person with the qualifications required by Schedule B and those efforts have been unsuccessful; and

      (b) the registered nurse that the dean proposes to hire in the place of such instructional staff has appropriate training and experience.
4. In addition to the qualifications referred to in sections 2 and 3, the other standards required for a school of nursing, in respect of the approval of the school of nursing for purposes of section 20 of the Act, are those set out in Schedule C to these regulations.

5. These regulations come into force on February 25, 2006.

SCHEDULE A
QUALIFICATIONS FOR DEAN OF NURSING

1. The required qualifications for a dean of nursing are:
   (a) eligibility for licensure as a registered nurse with ARNPEI;
   (b) earned doctoral degree with at least one degree in nursing;
   (c) at least five years combined experience in nursing practice and education;
   (d) demonstrated abilities in nursing research; and
   (e) demonstrated involvement in professional activities and community organizations.

SCHEDULE B
QUALIFICATIONS FOR MEMBERS OF THE INSTRUCTIONAL STAFF OF A SCHOOL OF NURSING

1. The required qualifications for faculty members are:
   (a) eligibility for licensure as a registered nurse with ARNPEI;
   (b) master’s degree in a relevant field with at least one degree in nursing;
   (c) minimum of three years nursing experience;
   (d) demonstrated potential to develop a program of research; and
   (e) research and scholarly activities that contribute to the expansion of nursing knowledge and curriculum development.

2. The required qualifications for Clinical Nursing Instructors are:
   (a) an eligibility for licensure as a registered nurse with ARNPEI;
   (b) a bachelor’s degree in nursing; and
   (c) a minimum of three years experience in nursing practice.

SCHEDULE C
PROGRAM STANDARDS FOR SCHOOLS OF NURSING

Standard 1 - Mission, philosophy, conceptual framework, goals and objectives

The mission, philosophy, conceptual framework, goals and objectives of the program must be congruent with the school’s mandate and reflect current professional nursing practice standards and entry level competencies as approved by the Council.

INDICATORS

1.1 The mission, philosophy, conceptual framework, goals and objectives of the program must be
   (a) written and congruent with professional nursing practice standards and entry-level competencies for the preparation of nursing professionals;
   (b) clearly stated and serve as a basis for developing, delivering and evaluating the programs offered by the school; and
   (c) reviewed periodically and revised as appropriate, to reflect trends in society, nursing, education and health care delivery locally, nationally and globally.

1.2 Policies of the nursing program must support the program’s mission, philosophy, conceptual framework, goals and objectives, and are reviewed and revised as necessary to reflect on-going development.
1.3 Polices of the nursing program must be fair and accessible to the public and include, but are not limited to, student recruitment, admission, advancement and retention.

1.4 The faculty, students of the program, graduates, and the broader nursing community must be involved in ongoing efforts to improve the quality of the program.

Standard 2 - Program Commitment and Resources

The program must have sufficient human, financial, technological, and clinical resources, facilities and services so that students are capable of achieving the competencies required for beginning practitioners as determined by the Association of Registered Nurses of PEI.

INDICATORS

2.1 There must be appropriate resources (human, physical, financial, technological and clinical) to facilitate the creation and implementation of the curriculum and foster its ongoing improvement.

2.2 The nursing faculty must be sufficient in number and adequately prepared to develop, deliver and evaluate the curriculum components of the program.

2.3 Research and scholarly activities that contribute to the expansion of nursing knowledge and curriculum development must be conducted by nursing faculty.

2.4 Faculty accomplishments in teaching, scholarship service and practice are congruent with the mission, philosophy and goals/objectives of the program.

2.5 The clinical learning activities and placements must provide sufficient opportunities for students to meet curriculum objectives:
   (a) there must be a minimum of 1600 hours of relevant clinical practice in a variety of practice settings including acute care, long-term care and community;
   (b) the nursing component as measured by credits and course hours must comprise at least 60% of the program;
   (c) learning activities and clinical placements must occur in a variety of interdisciplinary primary health care settings;
   (d) the student to instructor ratio must not be greater than 8:1 in one clinical setting.

2.6 Students, graduates, consumers, employers, educators and researchers have continued opportunity to participate in curriculum development, and evaluation of the nursing program.

2.7 Resources, including books, journals, computers, information technologies, audio-visual and other learning resources must be current, available, accessible and in sufficient quantity to meet the curriculum objectives.

2.8 Physical facilities, such as classrooms, office space, seminars and conference rooms, and computer and laboratory space must be adequate to meet the requirements of the curriculum.

2.9 The program must monitor, record and respond to enrolment trends, including but not limited to, the number and characteristics of applicants, the admission and attrition rates.
Standard 3 - Curriculum and Teaching/Learning Practices

The curriculum and teaching learning practice must provide learning experiences necessary for students to achieve the professional standards and competencies required for beginning practitioners, as defined by the Association of Registered Nurses of PEI.

INDICATORS

3.1 The curriculum of the program must reflect the requirements for professional nursing practice.

3.2 The curriculum must be responsive to and reflect current trends in:
   (a) population health and health promotion;
   (b) nursing practice and nursing research;
   (c) education;
   (d) health care delivery; and
   (e) society.

3.3 The curriculum must describe the full program of studies including the structure of the curriculum and course offerings.

3.4 The curriculum must describe the teaching and learning process. Learning must take place in a broad context that is sensitive to linguistic, ethnic, spiritual, cultural and social diversity.

3.5 The curriculum must address trends, issues, and legal-ethical considerations in nursing and health care.

3.6 Learning activities (e.g. classes/seminars/conferences, laboratory experiences or combinations of these or equivalent approaches) and the clinical fieldwork experiences must provide students with the opportunity to meet the outcomes, goals, and objectives.

3.7 Systematic and continuous evaluation of all curriculum components, including the goals/objectives, content, course time frames, learning activities and performance evaluation methods, must be performed to ensure ongoing development and enhancement of the curriculum. The evaluation must include input from students, graduates, faculty, health care agencies and when appropriate, other programs within the educational institution.

3.8 When the school plans major revisions in content, process or time frames for curriculum delivery, there must be consultation with the Association of Registered Nurses of PEI; and other groups, as appropriate.

Standard 4 – Program Effectiveness – Student and Graduate Performance

Throughout the program, students demonstrate progress towards achieving the entry-level competencies and standards for nursing practice required for beginning practitioners, as determined by the Association of Registered Nurses of PEI.

INDICATORS

Students

4.1 University and program admission requirements, including prerequisites, must be met by students and provide reasonable assurance of success in the program.

4.2 Student progress toward achieving the goals/objectives of the program and entry level competencies as required by ARNPEI must be evaluated, documented and communicated systematically to students throughout the program.

4.3 Policies and procedures relating to student advancement, failure, withdrawal, appeal, re-admission and graduation from the program must be established and followed.
Graduates

4.4 Processes must be in place to monitor and respond to trends in graduates’ performance on the entry to practice registration examination.

4.5 Processes must be in place to regularly monitor and respond to input from employers and graduates regarding graduates’ readiness to meet nursing practice requirements in the workplace.

EXPLANATORY NOTES

These regulations establish the requirements and standards according to which the Minister may, for the purposes of the Act, approve of a school of nursing in the Province. These include requirements in respect of the qualifications of the dean of nursing at the school and the instructional staff of the school. Minimum program standards are also specified.