



College of
Registered Nurses
of Manitoba

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DEAR MINISTER OF HEALTH:



April 2017

The Honourable Kelvin Goertzen
Minister of Health, Seniors and Active Living
Room 302, Legislative Building
450 Broadway
Winnipeg, MB R3C 0V8

Dear Minister Goertzen:

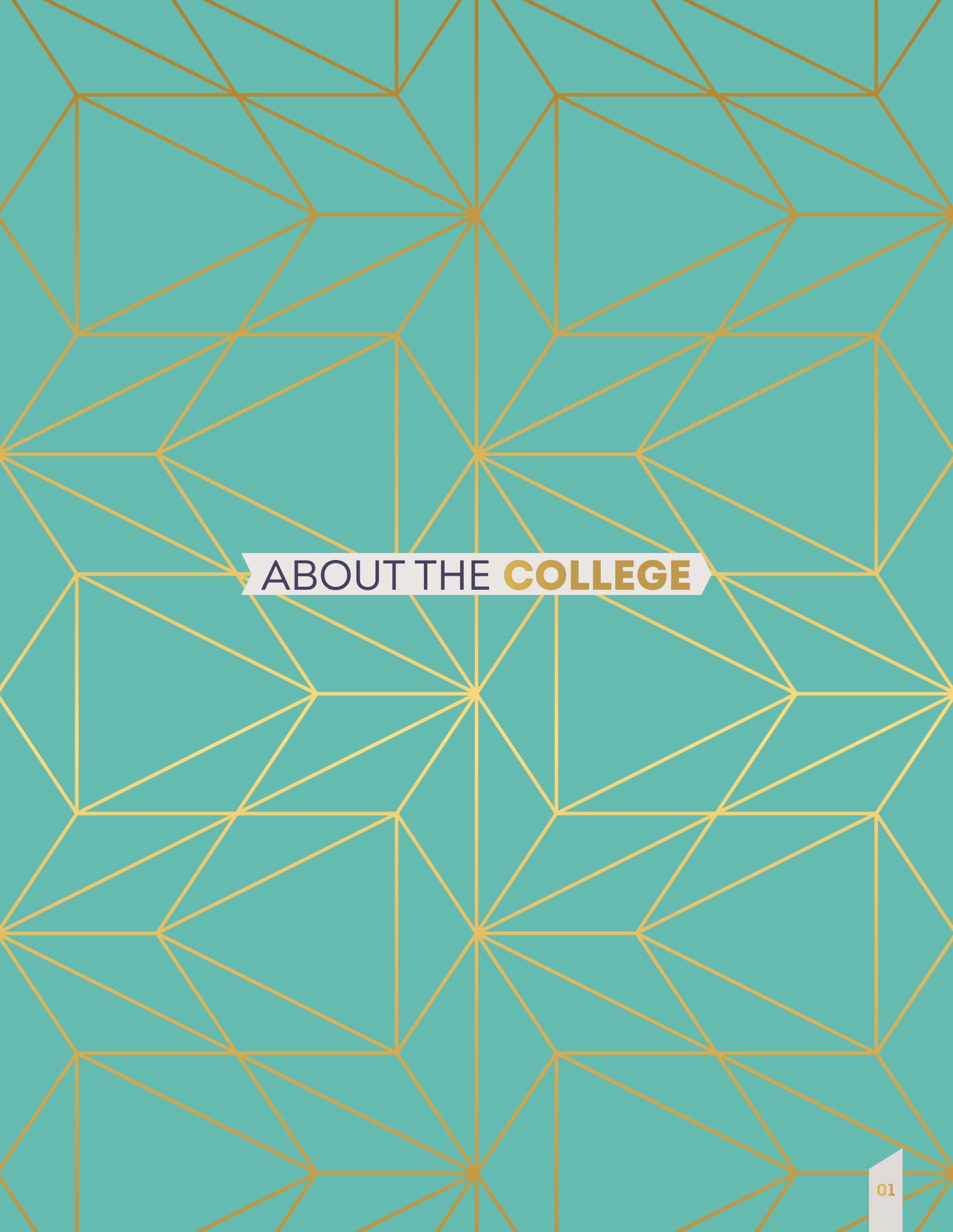
We are pleased to present our 2016 annual report. This report covers the period from Jan. 1, 2016 to Dec. 31, 2016 and includes a statement of accounts of the College of Registered Nurses of Manitoba.

Respectfully submitted,

Marie Edwards RN
President

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ABOUT THE **COLLEGE**



The College of Registered Nurses of Manitoba is the regulatory body for all registered nurses, registered nurse (nurse practitioners), graduate nurses and graduate registered nurse (nurse practitioners) in Manitoba.

The purpose of regulation is to protect the public by ensuring RNs practise in a safe, competent and ethical manner. We carry out our work in a number of ways:

We set standards for registered nursing education, registration and practice:

- We approve nursing education programs.
- We have a registration process to ensure applicants meet the requirements to practise as an RN in Manitoba.
- We set the standards of nursing practice that all RNs are required to meet every day.
- We set and monitor continuing competence requirements to ensure RNs remain current in their practice.

We support registered nurses in meeting the standards:

- We provide educational opportunities and resources.
- We provide confidential practice consultation services.

We take action when the standards are not met:

- We receive and handle complaints about registered nursing practice and take appropriate action with fairness and transparency.

It's together with nurses that we protect the public. While the College sets the standards with input from RNs, RNs live them out through their day-to-day work in delivering safe, competent and ethical registered nursing services.

The College has been the professional regulatory body for RNs in Manitoba since 1913. *The Registered Nurses Act and Regulations* set out our responsibilities.

VISION, MISSION AND VALUES



Our mission, vision and values guide the work we do and how we do it. We explored creative ways to share these statements with RNs and the public in 2016 and have included this work on page 26.

Vision

Leadership and innovation in registered nursing regulation.

Mission

To protect the public through quality registered nursing regulation.

Values

- **EXCELLENCE**
We strive to be and do the very best.
- **LEADERSHIP**
We demonstrate best practices in regulation.
- **RESPECT**
We trust our partners and work openly and honestly.
- **INNOVATION**
We collaborate to create unique approaches to opportunities and challenges.
- **INTEGRITY**
We operate with fairness to ensure accountability.

STRATEGIC PRIORITIES

The Board of Directors sets the strategic objectives for the College. These include:

- 01 Support RNs to meet and maintain regulatory standards.
- 02 Work collaboratively to advance RN regulation.
- 03 Increase awareness of the role of the College.

Wildly Important Goals

Establishing and achieving goals related to our strategic priorities is one of the ways we are accountable to the public. Each department in the College contributes to this by setting “wildly important goals” (WIGs) related to a specific strategic priority to complete by the end of the year. A fourth priority was set by College staff to measure the implementation of a key operational priority. Our 2016 WIGs were as follows:

Strategic Priority 1:	Strategic Priority 2:	Strategic Priority 3:	Strategic Priority 4:
Support registered nurses to meet and maintain regulatory standards.	Work collaboratively to advance RN regulation.	Increase awareness of the role of the College.	Operational.
WIG: Implement the clinical competence assessment.	WIG: Have nursing programs able to be assessed with revised process.	WIG: Increase the public’s awareness on the role of the RN and RN(NP).	WIG: Have the new member database in use and fully functional.

BALANCED SCORECARD

Year ending Dec. 31, 2016

Staff provided a status report of their departmental WIGs in the form of a balanced scorecard at the end of each quarter.

Each WIG was graded on a performance level of green (on track), yellow (experiencing setback) or red (not on track). Our complete balanced scorecard for 2016 is available on our website throughout the year to provide an update for RNs and the public.

Strategic Priorities 2015-2018	1 Support registered nurses to meet and maintain regulatory standards	2 Work collaboratively to advance RN regulation	3 Increase awareness of the role of the College	4 Operational
Wildly Important Goal (WIG)	1 Implement clinical competence assessment	2 Nursing education programs able to be assessed with revised process	3 Increase in public awareness of role of RN and RN(NP)	4 Full utilization of current system functionality in new member database
Lag Measure	From 0-100% by December 2016	From 0-100% by December 2016	From 71-77% by December 2016	From 0-100% by December 2016
Performance Level for 2016				

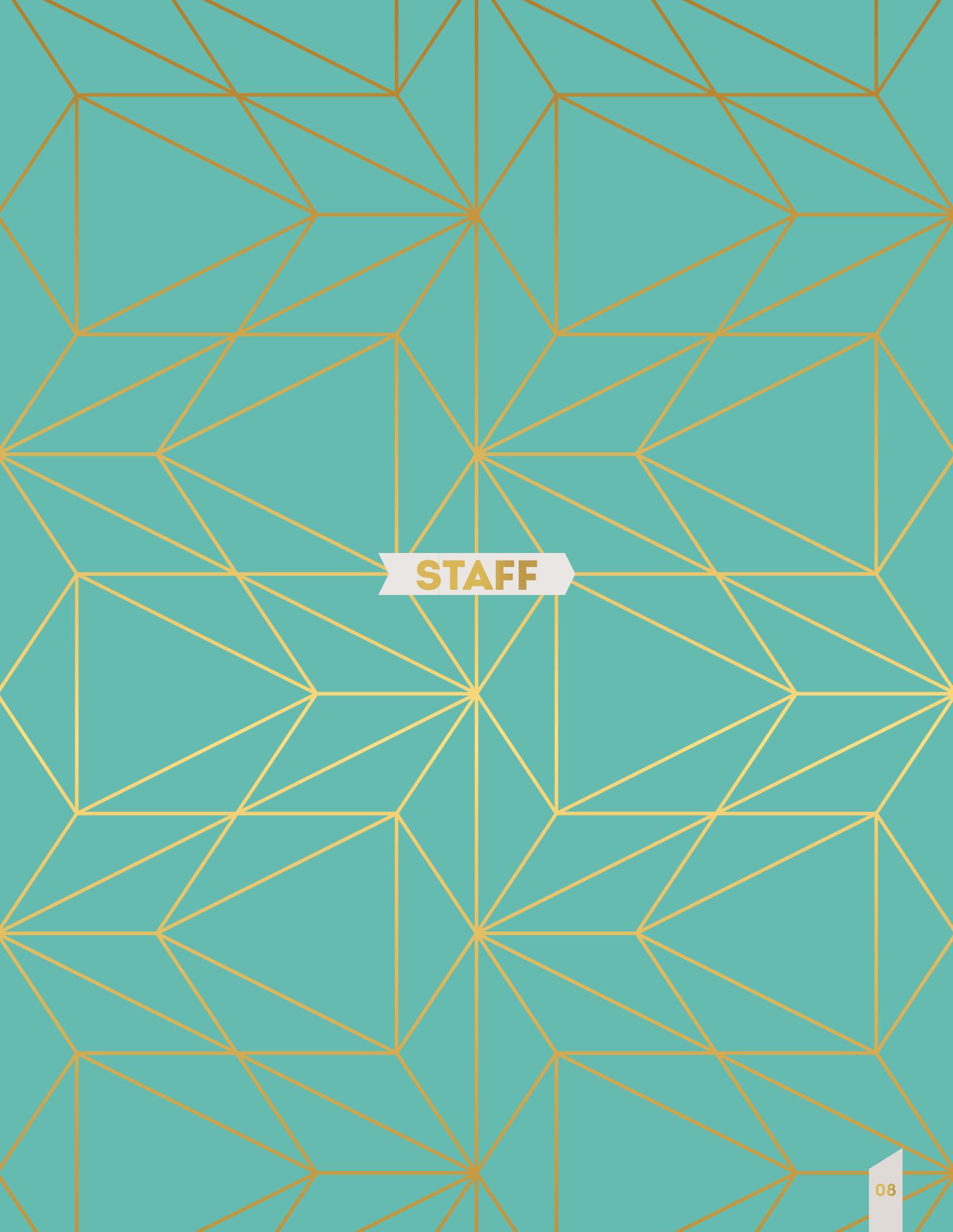
2016 marked the first year where College departments set “wildly important goals” to complete by the end of the year. As you can see, three of our four goals did not meet target. For 2017 and beyond, we will continue to identify what is considered a reasonable target and learn how we can best monitor our progress throughout the year.



ORGANIZATIONAL **STRUCTURE**

ORGANIZATIONAL STRUCTURE





STAFF

STAFF

As at Dec. 31, 2016

Executive Director

Katherine Stansfield RN

Leadership Team

Deb Elias RN Director of Practice and Standards

Steve Lanktree Director of Corporate Services

Leanne Matthes Senior Consultant, Policy, Governance and Strategic Initiatives

Suzanne Wowchuk RN Director of Registration and Professional Conduct

Staff

Peggy Aitchison Administrative Assistant, Practice and Standards

Marie Allan Coordinator, Practice and Standards

Lorena Aquino Accountant

Sherry Brown RN Practice and Standards Consultant (on leave)

Marilyn Bullied Office Administrator

Alma Dela Cruz Accounts Payable Coordinator

Birgit Dotzlaw Executive Assistant

Daisy Felix Controller (on leave)

Ron Halford Manager of Information Technology

Kristin Hancock Manager of Communications

Diana Heywood RN Practice and Standards Consultant

Tanis Hill Registration Coordinator

Susan Irwin Manager of Operations and Human Resources

Heather Kolowca RN Case Manager, Professional Conduct (on leave)

Ainsley Kullman RN Case Manager, Professional Conduct

Tracey Legary RN Manager of Professional Conduct

Allison Leveque RN Practice and Standards Consultant

Tammy Murdoch RN Manager of Registration Services

Lizette Navida Accountant (on leave)

Miranda Noel RN Registration Advisor

Melva Nordquist Coordinator, Professional Conduct

Darlene O'Reilly RN Practice and Standards Consultant

Pamela Plouffe Administrative Coordinator, Registration Services

Samantha Psoch Case Manager, Professional Conduct

Lindsay Ridgley Communications Specialist (on leave)

Dayna Robbie Communications Specialist

Liisa Stewart Registration Coordinator and Technical Analyst

Roberta Thompson RN Case Manager, Professional Conduct

Jason Trottier RN Case Manager, Professional Conduct

Cheryl Waldner Communications Specialist

Jorge Wengiel Controller

Erin Whiteway RN Practice and Standards Consultant

Marcy Wiebe Administrative Assistant, Policy and Governance

Leona Wilkinson Coordinator, Registration and Professional Conduct

Patrick Yeates Operations Coordinator

MESSAGE FROM THE PRESIDENT AND EXECUTIVE DIRECTOR



MARIE EDWARDS RN
PRESIDENT, BOARD OF
DIRECTORS



KATHERINE
STANSFIELD RN
EXECUTIVE DIRECTOR

MESSAGE FROM THE PRESIDENT AND EXECUTIVE DIRECTOR



Protecting the public is the College's number one priority and, as a result, accountability must be a part of everything we do.

It is our responsibility to the public and RNs to communicate openly and honestly, and to strive for transparency. Given this responsibility, a considerable amount of our work in 2016 revolved around setting up mechanisms to provide a more effective way of communicating our accountability to the public and RNs. Examples of this can be seen throughout this report including our “wildly important goals” and balanced scorecard.

The work of the College is supported by RNs and members of the public at every level: the Board of Directors, committees and staff members work together to strive for this level of accountability. It would be impossible to accomplish our work without the support and collaboration of all our stakeholders.

At the Board level, much of this year's work focused on our commitment to a renewed governance model. We invested in a risk management strategy that continues to shape our conversations. Our new model will reduce our Board size to 12 members by 2018 and also recruit directors in a way that promotes representation from a diverse population. As well, we began to interpret the strategic directions for the College into measurable priorities that are monitored on a scorecard. This is another way the Board ensures its accountability to the public.

For our staff members, this accountability came in the form of our “wildly important goals” (WIGs) for 2016: key initiatives that we identified as being significant contributions to the College's strategic priorities, as identified by the Board. We developed scorecards to demonstrate progress and posted an updated scorecard on our website after each quarter. These WIGs included:

- Implement a new Clinical Competence Assessment program
- Develop a revised process for assessing nursing education programs
- Increase public awareness of the role of RNs and RN(NP)s
- Implement a new database system for improved accessibility and member service

For RNs, accountability to the public can be seen in continuing competence program requirements, jurisprudence learning modules and a redesigned registration renewal process. It is together with RNs that we protect the public and we are always exploring new ways to display this commitment.



MARIE EDWARDS RN
PRESIDENT, BOARD OF DIRECTORS



KATHERINE STANSFIELD RN
EXECUTIVE DIRECTOR

BOARD OF DIRECTORS



as at Dec. 31, 2016

Back Row

- Sonia Kowalewich, Public Representative
- Brent Gouthro RN(NP)
- Don Himbeault, Public Representative
- Rosemary Chambers, Public Representative

Middle Row

- John Deacon, Public Representative
- Noah Gatzke RN(NP)
- Kathryn Chachula RN
- Chris Ainley RN
- Luis Martinez, Public Representative

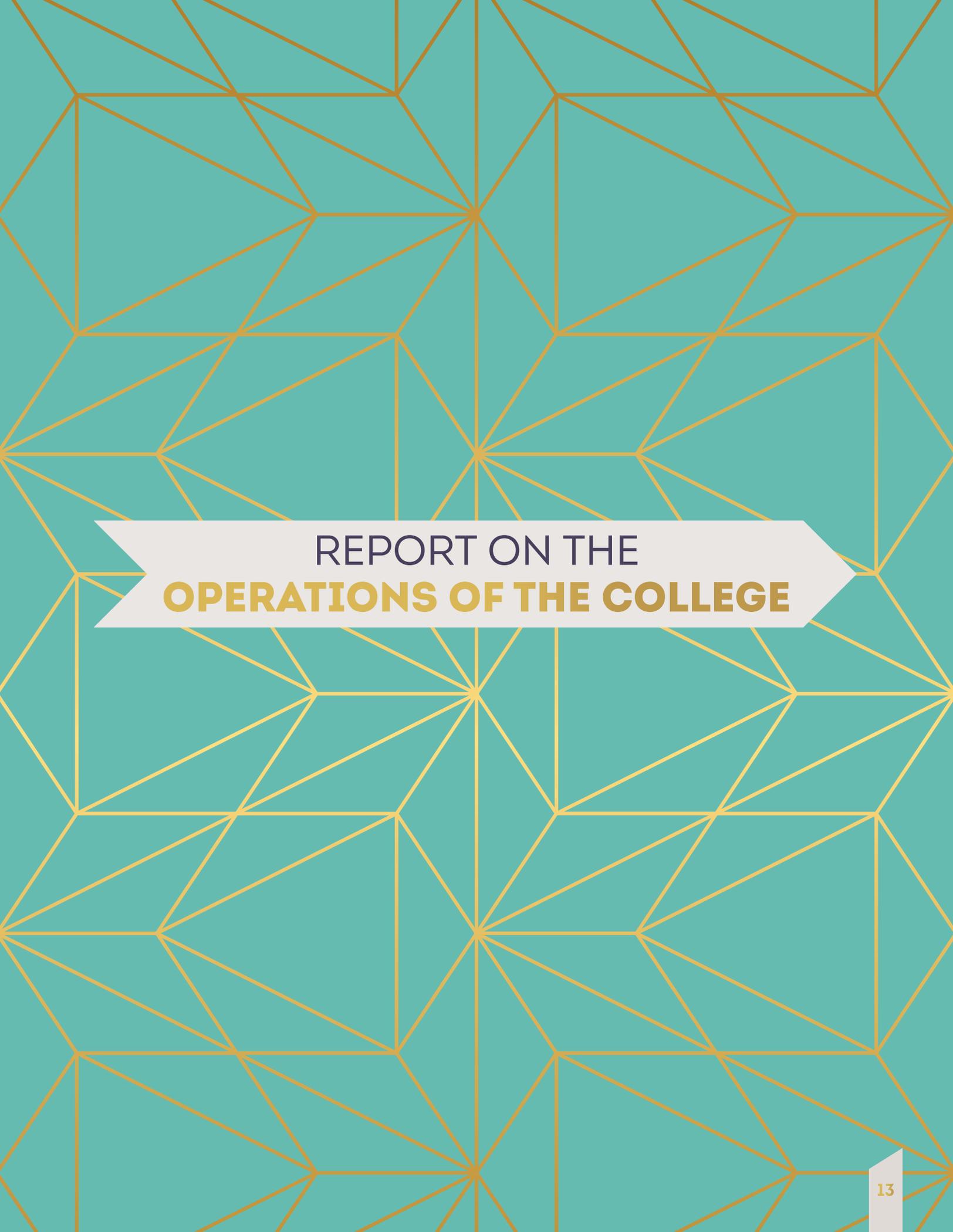
Front Row

- Katherine Stansfield RN, Executive Director
- Marie Edwards RN, President
- Trish Bergal RN, President-Elect
- Deborah Stewart RN

Absent

- Thomas Adam RN
- Sonia Jablonski-Praznik RN
- Carol Legare RN
- Lorne Gibson, Public Representative

The College's Board of Directors is made up of two thirds RNs and one third public representatives. Nurses across the province elect their peers, while the public representatives are appointed by the Board and the government. The Board includes the President, President-Elect, eight elected member representatives and six public representatives. The Board of Directors sets policy and governs the College in the interest of the public.



REPORT ON THE
OPERATIONS OF THE COLLEGE

SETTING STANDARDS FOR EDUCATION, REGISTRATION AND PRACTICE

Nursing Education Program Approval

Nursing education programs that lead to initial registration or re-entry onto a register with the College go through an education program approval process. To ensure these programs meet the standards set by the College, new programs are reviewed prior to accepting students. Existing programs are reviewed on an ongoing basis. The following programs were reviewed in 2016.

Université de Saint Boniface Baccalaureate of Nursing Science

Université de Saint Boniface (USB) offers the only French language baccalaureate of nursing science program in Manitoba. In 2011, the Board granted a five-year approval when the program initially transitioned from a nursing diploma program to the current baccalaureate program. In February 2016, the program was reviewed by two independent evaluators.

The reviewers found the program has highly qualified and committed faculty resulting in exceptionally well-prepared students. However, the Education Program Committee recognizes that USB is at a crossroads and has concerns with regard to the sustainability of the program under their current governance structure.

The Board granted a two-year conditional approval to the baccalaureate of nursing science program at USB with annual updates being reported to ensure that the gaps identified in the report are being addressed.

University of Manitoba, University College of the North – Third and Fourth Year Syllabi

The University of Manitoba notified the College of their intent to undergo substantive curriculum

changes to be implemented in September 2015. As a result, the program was required to undergo a full review. The curriculum for each year had not been fully developed and required a staged approval process which involves the Board reviewing each year of the program as it is developed. The two year syllabus was approved by the Board in December 2015, the three year syllabus was approved in March 2016 and the four year syllabus was approved in December 2016.

University of Manitoba Master of Nursing - Nurse Practitioner Program

The Board approved the University of Manitoba's Master of Nursing - Nurse Practitioner Program as providing the competencies required for the prescribing of controlled drugs and substances. This will begin with students who have completed the RN(NP) program with anticipated graduation in the fall of 2016.

Red River College Registered Nurse (Authorized Prescriber) Program

In December 2016, the Registered Nurse (Authorized Prescriber) program was approved by the Board for a three-year term. This education will support the expanded role of RN prescribers as RNs come under *The Regulated Health Professions Act*.

Red River College Simulation Pilot Project

Red River College was granted an extension of their simulation pilot project in December 2016 for an additional two years. Simulation will replace a maximum of 25 per cent of clinical practice experience in one course.

REGISTRATION

Members

On Dec. 31, 2016, the College had 14,040 members. The following table shows the number of members on each register.

Registered Nurse	13,634
Registered Nurse (Nurse Practitioner)	187
Graduate Nurse	48
Graduate Nurse Practitioner	0
Non-Practicing	171

For more statistics, see page 33.

Applicants

In 2016, the College received applications from 1,244 applicants.

	Number	% of Total
Manitoba Educated Applicants	557	44.8%
Applicants from other Canadian Jurisdictions	225	18.1%
Internationally Educated Applicants	173	13.9%
Reinstatement/ Conversion	289	23.2%
Total	1,244	100%

At the end of 2016:

- 919 of these applicants obtained RN registration
- 25 of these applicants obtained RN(NP) registration
- 36 of these applicants were not approved for registration because they did not fulfill the requirements
- 264 applicants were in progress

REGISTRATION EXAMS

National Council Licensure Examination – Registered Nurse (NCLEX-RN)

NCLEX-RN is the approved exam for the purpose of establishing initial RN registration in Manitoba. Applicants who have successfully written the exam since 1982 are eligible for registration, provided they have met all other requirements.

2016 NCLEX-RN Pass Rates

In 2015, the NCLEX-RN became the approved exam for the purpose of establishing initial registration as a registered nurse in Manitoba. Throughout 2016, NCLEX-RN pass rates in Manitoba continued to improve as compared to 2015. The 2016 exam results were under embargo by the Canadian Council of Registered Nurse Regulators (CCRNRR) at the time this annual report was created and will be available on the College’s website after May 11, 2017.

Number of Writes

Since NCLEX-RN became an approved entry-to-practice exam in Canada, we have been involved in a working group that is exploring factors that impact exam eligibility, including the number of allowable writes. In the spring of 2016 this work was completed and at their September meeting, the College’s Board gave approval to proceed with changes to current regulations to update the number of writes.

The changes to regulation include:

- removing the maximum of three attempts on the exam
- enacting a three-year eligibility period for writing the exam (This means that a person would be eligible to attempt the exam as many times as permitted within three years of completing his/her nursing education program. The exam cannot be written more than once every 45 days.)
- removing the course of instruction requirement after a second failed attempt on the exam

At the end of 2016 our request to government was still awaiting approval.

Canadian Nurse Practitioner Exam: Family / All Ages (CNPE)

The CNPE is an approved exam for the purpose of establishing initial registration as a registered nurse (nurse practitioner) in Manitoba. The CNPE is based on the RN(NP) core competencies that an entry-level family/all ages RN(NP) must have to practise safely, effectively and ethically. Twenty-two candidates wrote the CNPE in 2016 and 21 writers passed the exam on their first attempt.

PRACTICE

Registered Nurse (Authorized Prescriber)

We actively continue preparations to put the RN(AP) role into practice in Manitoba. After completing a Board-approved course of instruction to meet the necessary competencies for practice, an RN(AP)'s scope may include:

- travel health
- reproductive health, sexually transmitted infections and blood borne pathogens
- diabetes health

Following the Board of Directors' approval of Red River College's authorized prescriber course in December 2016, the College is assembling a working group to support implementation and evaluation of this new role under *The Regulated Health Professions Act*.

Registered Nurse (Nurse Practitioner) Prescribing Authority

RN(NP)s can now apply to prescribe methadone for analgesia and/or opioid use disorder. In December 2016, we established a process with Health Canada's Office of Controlled Substances for RN(NP)s to receive this exemption. Together with the College of Physicians and Surgeons of Manitoba and the College of Pharmacists of Manitoba, we developed the training framework that's required for RN(NP)s to meet the competencies for methadone and buprenorphine prescribing. Our board-approved policy, *R-25 RN(NP) Prescribing Controlled Drugs and Substances*, outlines the expectations for RN(NP)s who want to apply for this prescribing authority and is available on our website.

Continuing Competence Program

Each year, Manitoba RNs and RN(NP)s participate in the College's continuing competence program (CCP). An annual requirement for registration renewal, the CCP allows RNs and RN(NP)s to demonstrate a commitment to maintain and improve their practice.

Jurisprudence

We launched the 2016 jurisprudence learning module in March as part of the annual CCP requirements. This module focused on professionalism in nursing practice and covered topics such as accountability, duty to care, privacy and confidentiality, professional boundaries and professional image. The next module, documentation and record keeping, is scheduled to launch in early 2017.



Continuing Competence Program Review

In 2016, 657 RNs and 34 RN(NP)s were randomly selected to participate in the continuing competence program review. In late 2016, CCP reviewers (RNs and RN(NP)s) met to review the submissions and make recommendations on whether or not members met the CCP requirements. Here is a breakdown of the results:

Register	Exemplary	Met Requirements	Met with Recommendation*	Did Not Meet**	Did Not Submit and Did Not Renew***
RN	43	516	56	10	32
RN(NP)	3	26	4	1	0

*Members met the overall CCP requirements but could improve on specific elements of the self-development plan. For example, members may need to improve upon their goal-setting skills.

**Members are required to complete a remedial activity and participate in the 2017 CCP review.

***Members are required to complete the CCP in the year of their reinstatement.

Multi-Source Feedback

Some RNs and RN(NP)s were required to complete multi-source feedback in addition to the CCP review. This process involves a 360 degree review of a member's practice, including a self-questionnaire and feedback from colleagues and the public (if applicable).

In 2016, 197 RNs and 34 RN(NP)s were selected to participate in multi-source feedback. Here is a breakdown of the 2016 results:

Register	Met Requirements	Did Not Meet*	Did Not Complete**	Deferrals	Did Not Submit and Did Not Renew
RN	130	16	24	20	7
RN(NP)	28	0	4	1	1

*Members who did not meet the threshold. These members will be required to complete a competency-based interview in 2017.

**Unable to create multi-source feedback report due to insufficient responses.

Competency-Based Interview

A competency-based interview (CBI) is a structured interview that assesses an RN's or RN(NP)'s knowledge, skill and judgment to help identify areas of strengths and areas of practice improvement. In this interview, an RN or RN(NP) is asked to describe a recent situation or client case and discuss his or her actions and the results of the situation or the client outcomes.

An RN or RN(NP) may participate in a CBI through CCP in response to the multi-source feedback results or as directed by the Continuing Competency Committee. In 2016, 23 RNs were required to complete a CBI related to CCP. Out of the 23 RNs who required a CBI:

- 10 members were required to complete remedial activities related to CBI (e.g. reflective exercises, review literature on informed consent)
- Seven members did not require any remediation related to CBI
- Six members were deferred and will complete a CBI upon returning to registered nursing practice

SUPPORTING REGISTERED NURSES IN MEETING THE STANDARDS

Practice and Standards Support

We develop resources to support RNs and RN(NP)s and provide consultation and education to RNs and RN(NP)s – both on a one-to-one basis as well as to groups.

The practice and standards team handled more than 2,490 consultations in 2016. These consultations were with RNs, RN(NP)s, employers and members of the public. Topics were wide-ranging with a significant increase in requests to the practice and standards team in the last quarter of 2016. While we continue to receive inquiries regarding the continuing competence program (CCP) and its components (including jurisprudence, CCP review and multi-source feedback), we also provide support for registration renewal.

The following topics are the top five categories for consultations in order:

- **Scope of practice/reserved acts**
- **Professional practice issues**
- **Prescribing**
- **Documentation**
- **Standards of practice**

The College’s publications and web resources were frequently referenced and recommended to RNs as a guide to help them in their practice and assist them in developing options to consider.

The practice and standards consultants also provided about 25 presentations to RNs and other groups in Manitoba in 2016. Some of these presentations, while counted as one presentation, were actually delivered to multiple sites simultaneously through the use of technology.

The College’s practice and standards consultants also regularly write the “Ask a Practice Consultant” article in *NurseLink*. Each article addresses current questions and situations about nursing practice.

In addition, College staff participated in a regular review of the numerous existing College publications, updated them as required and developed new publications as necessary.

New Practice Database

In an effort to continuously improve the consultation service offered by the practice and standards team, we developed and instituted a database in 2016. The database allows us to comprehensively capture information regarding calls, analyze trending needs as well as ensure that the information we provide is consistently reflective of best practices for all members. The analysis gleaned through the database is used to determine future topics for webinars, presentations and other educational products. The database assists the practice and standards team in mitigating the risk of managing consultation information, timeliness for responses and developing support resources for our members and the community at large.

Webinars

The College offered 11 free webinars in 2016. RNs were able to access these webinars from a computer, tablet or smartphone anywhere with an Internet connection. Attendance ranged from 20 to over 150 participants and topics included documentation, substance misuse and abuse, entry-level competencies for RN(NP)s, professional practice issues, accountability, medical assistance in dying and more. Past webinars remain available on our website for continued access to information.

2016 Education Day

This fall, we opened our annual Education Day event to all health-care professionals in Manitoba looking to discuss the global context of medical assistance in dying and the current state in our province and country. Attendees heard from leaders in this new legislation including Dr. Mary Shariff BSc LLB LLM PhD, Dr. Harvey Chochinov MD PhD FRCPC FRSC, the Medical Assistance in Dying Provincial Services team and the Medical Assistance in Dying Nursing Advisory Group.



We offered online participation in Education Day for the first time ever in 2016. We look forward to committing to our value of innovation and providing unique opportunities for Manitoba's nurses to participate in our work.



Regulatory Services Support

Registration Support

The registration services team provides regular presentations on registration requirements and the application process to students in Manitoba's nursing education programs and other groups upon request. The team offered two webinars in 2016 to highlight the license fee adjustment as well as the new registration renewal process, with attendance ranging from 119 to 254, respectively. RNs were able to access these webinars from a computer, tablet or smartphone anywhere with an Internet connection and they remained available on our website during the registration renewal and reinstatement periods.

Professional Conduct Support

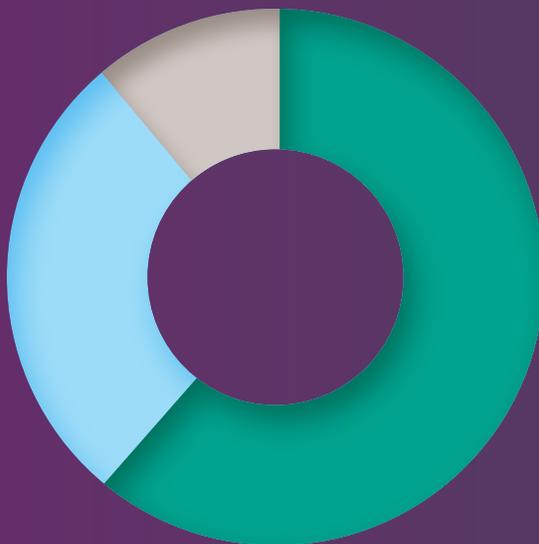
The professional conduct team provides regular consultation to RNs and their employers to discuss practice, duty to report and general complaints, investigation as well as discipline processes. In three issues of *NurseLink*, we published a three-part series on the College's complaints resolution process. Part one featured the complaints process, part two detailed the Investigation Committee and part three outlined the Discipline Committee and appeals process.

The team also offered one webinar in 2016 that discussed substance misuse, abuse and the investigation process of an RN suspected of having a substance use disorder. Additionally, the team travelled around the province in 2016 providing presentations to students, employers and registered nurses regarding the complaints resolution process, issues identified in the process and lessons learned.

TAKING ACTION WHEN THE STANDARDS ARE NOT MET

Complaints and Reports

In 2016, we received 76 complaints or reports regarding registered nursing conduct or practice. The majority of complaints received in 2016 were from:



- **49%** Employers
- **22%** Public
- **9%** Executive Director*

**Pursuant to s 19 (b) of The Registered Nurses Act, the Executive Director shall refer to the Investigation Committee any other matter that the Executive Director considers appropriate.*

The majority of complaints received in 2016 originated in a hospital setting (53 per cent), followed by long-term care settings (20 per cent) and home care (18 per cent).

Disposition of New Complaints/ Reports Received

Decisions Made in 2016	Total
Complaint/report carried forward to 2017	15
No further action	12
Member received Letter of Guidance	9
Member's registration subject to conditions (s. 28)	8
Member entered into an undertaking	7
Member surrendered registration	7
Complaint deemed trivial, vexatious or obviously unsustainable under Board policy C-14	7
Investigation ongoing	6
Closed	3
Complaint/report held in abeyance	1
Member referred to Discipline Committee	1
Informal resolution	0
Member received a censure	0

Number of Complaints Received by Year



Discipline Committee

In 2016, three cases were referred to discipline:

1. A case from 2014 was referred in 2016 following an investigation into the matter. The hearing commenced on Oct. 12, 2016. It was adjourned and is anticipated to recommence in 2017.
2. A case from 2015 was referred in 2016 following an investigation into the matter. The hearing commenced on Dec. 1, 2016. It was adjourned and is anticipated to recommence in early 2017.
3. A case from 2016 was referred in 2016 following an investigation into the matter. The hearing is set to commence in early 2017.

Activity in 2016 from matters referred in prior years:

1. A case from 2014 was referred in 2014 following an investigation into the matter. The hearing commenced on Dec. 11, 2014 and was adjourned to Oct. 19, 2015. The hearing reconvened on Oct. 19, 2015 and was adjourned to Dec. 2, 2015. The hearing reconvened on Dec. 2, 2015 and was adjourned to March 21-23, 2016. On June 13, 2016 a panel of the Discipline Committee found the member guilty of professional misconduct. The hearing reconvened on Sept. 26, 2016 for the panel to hear arguments for disposition.

At the conclusion of the hearing the panel ordered that the member be suspended for 18 months. Following the 18-month suspension the panel ordered conditions on the member's registration to include that the member:

- shall not engage in registered nursing practice wherein the member is providing one-on-one care to female patients/clients unless the member can be directly observed at all times by another health-care professional.
- shall advise all of his registered nursing employers or potential registered nursing employers of the conditions imposed on his registration.
- shall provide written confirmation to the Manager of Professional Conduct or delegate of the names and addresses of all future registered nursing employers together with confirmation that he has advised all such employers of the terms of this order.

The panel also ordered costs in the amount of \$5,000 to be paid within one year of the member's return to registered nursing practice.

2. A case from 2011 was referred in 2014 for breaching an undertaking with the Investigation Committee. The hearing commenced on July 18, 2014 and was adjourned. The hearing reconvened on June 19, 2015 and was adjourned. On Aug. 26, 2016 the hearing reconvened and a panel of the Discipline Committee found the member guilty of professional misconduct. At the conclusion of the hearing the panel ordered that the member complete a paper that was outstanding from an undertaking with the Investigation Committee and ordered costs in the amount of \$5,000.
3. A case from 2011 was referred in 2015 for breaching an agreement with the Investigation Committee. The hearing commenced on Dec. 9, 2015. The hearing was adjourned to reconvene to set hearing dates in 2016.

The hearing reconvened on March 15, 2016 but adjourned the hearing originally scheduled for March 15 & 16, 2016 due to the unavailability of the member. However, the panel did determine to reconvene on April 18, 2016 to deal with preliminary motions. The hearing reconvened

on April 18, 2016 and adjourned to June 7, 8, 14, Aug. 22, 23, 2016. At the conclusion of the hearing a panel of the Discipline Committee found the member guilty of professional misconduct and cancelled the member's registration to practice. The panel ordered costs in the amount of \$30,000.

4. A case from 2013 was referred in 2015 following an investigation into the matter. The hearing commenced on Sept. 14, 2015. The hearing reconvened on June 23, 2016. At the conclusion of the hearing a panel of the Discipline Committee found the member guilty of professional misconduct and ordered the member be reprimanded; pay a fine of \$5,000; complete remedial coursework and provide a paper; and pay costs of \$5,000 to the College.
5. A case from 2013 was referred in 2015 for breaching a suspension. The hearing commenced on Jan. 29, 2016 and was adjourned. The hearing reconvened on Oct. 31, 2016. The member did not appear. In the absence of the member and after hearing Counsel to the Investigation Committee, a panel of the Discipline Committee ordered that the Notice of Hearing be served substitutionally upon the member, and the hearing was adjourned. The hearing is set to reconvene in early 2017.
6. A case from 2014 was referred in 2015 following an investigation into the matter. The hearing commenced on June 19, 2015 and was adjourned. The hearing reconvened on June 29, 2016. At the conclusion of the hearing a panel of the Discipline Committee found the member guilty of conduct unbecoming. The panel ordered the member to have one year of drug test monitoring; to provide a current criminal record check verified by fingerprinting annually at registration renewal for the duration of this Order; to immediately report to the College any new criminal charges; and ordered costs of \$3,000.

Practice Audits

A practice audit examines an individual RN's practice by comparing specific components of the RN's practice to established norms, standards and benchmarks. An RN may be referred for a practice audit from several sources including the Investigation or Discipline Committee, the Executive Director or an investigator.

In 2016, one practice audit occurred as a referral from the Investigation Committee. The report from the practice audit was then provided to the Investigation Committee for their review and decision.

Unauthorized Practice

In Manitoba, individuals who practise as an RN and use the title "registered nurse" must be registered with the College. Employers also have the legal obligation to verify that the RNs they employ are properly registered. Failure to meet these requirements continues to be the contributing factor in cases of unauthorized practice.

In 2016, there were three cases of unauthorized practice identified. In accordance with Board policy, this resulted in the individuals being required to pay the unauthorized practice penalty fee.

Practitioner Remediation and Enhancement Partnership (PREP) Program

The College started the PREP program in 2007 as a non-punitive, early intervention strategy to remediate and improve registered nursing practice. The goal of the program is to facilitate remediation for a nurse who demonstrates a deficit in knowledge, skill, judgment or attitude before it has an impact on patient safety.

The partnership exists between the RN, the employer and the College. The type of remediation and the length of time in the program vary greatly from nurse to nurse and situation to situation.

In 2016, there were several inquiries and one referral. We encourage employers to contact the College to learn more about the program.

EXCELLENCE IN REGULATION



Update on *The Regulated Health Professions Act*

Work continued throughout 2016 on RN-specific regulations to ensure they accurately reflect the current practice of RNs and RN(NP)s.

In January 2016, Manitoba Health instituted an Advisory Panel to review the General Council Regulation for RNs under the RHPA. In June 2016, the panel released its full report and recommendations, and the Minister has indicated his support for the College to continue to move forward in the process to become governed under the RHPA.

By the end of 2016, the College was awaiting cabinet approval on our regulations to begin the implementation process.



Medical Assistance in Dying

The College continues to navigate the implications of medical assistance in dying on RN practice and health care in Canada.

RN staff members from the College participate on an advisory committee that includes other health professions. The goal of the committee is to develop a guideline document and discuss important practice and ethical implications of new legislation.



Our 2016 Education Day was themed around medical assistance in dying and was our highest attendance yet.

The day featured discussion on the global context of medical assistance in dying and the current state in Canada and Manitoba. We discussed terminology, conscientious objection and the implications on nursing practice of implementing medically assisted dying in Canada. Presenters and audience members represented all disciplines engaged in providing medical assistance in dying, reflecting its interprofessional nature.

We provided an update to RNs through a webinar in December 2016 and continue to explore ways to share this information.

Fee Adjustment & Bylaw Amendment

As part of our requirements to come under the RHPA, the College can no longer collect fees on behalf of other organizations. As a result, the Association of Registered Nurses of Manitoba (ARNM) became the new jurisdictional member of both the Canadian Nurses Protective Society (CNPS) and the Canadian Nurses Association (CNA).

Up until 2016, the College collected fees from RNs during registration renewal and transferred them to CNPS and CNA. The fee paid for CNPS included professional liability protection and other legal services. All RNs on the practicing register are required by legislation to have professional liability protection through CNPS. The fee paid for CNA provided RNs with membership in CNA.

To facilitate this fee adjustment, RNs approved changes to bylaw VIII at our 2016 AGM to reduce registration fees to reflect the transfer of jurisdictional memberships.

Canadian Council of Registered Nurse Regulators (CCRNRR)

CCRNRR exists to promote excellence in Canadian RN regulation and to provide a voice for RN regulation practices, trends and issues nationally and internationally.

CCRNRR identified three priorities to focus its work:

1. Provide ongoing analysis, communication and development of improvement opportunities for NCLEX-RN
2. Support the development of a unique nurse identifier
3. Develop entry-level nurse practitioner competencies for approval by each jurisdiction

Throughout 2016, regulators worked collaboratively on other pressing initiatives including entry-level competencies for RN(NP)s, opioid misuse and best practices in prescribing, and development of French language study resources to assist francophone writers in preparing to write NCLEX-RN. It is important to have a unified voice across the country when approaching RN regulation.

Professional Nursing Awards

The College has had the privilege of hosting the Professional Nursing Awards for over 10 years. While it's been an honour to host an evening that recognizes the outstanding members of our profession, in 2016 we announced that the annual awards night will be planned by the Association of Registered Nurses of Manitoba beginning in 2017.

We were proud to work with the Association to transition this responsibility and the Association looks forward to planning this event to continue their mission of promoting excellence in registered nursing practice, and advocating for RNs and the health of people living in Manitoba.

AWARENESS



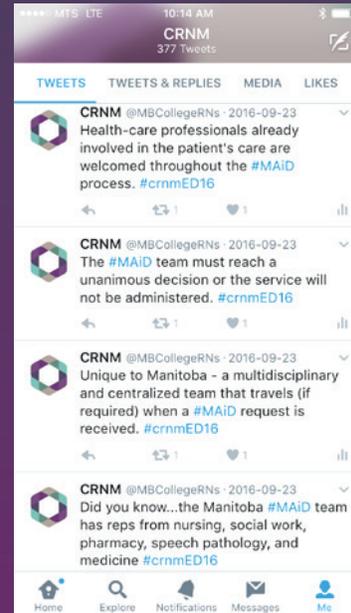
The Role of the RN Campaign



After launching our “Role of the RN” campaign in 2015, we purchased an additional media block in 2016 to run the advertisements online and on TV. While the campaign ran only a short time in early 2016, we gathered a lot of feedback about the message from both the public and RNs. Concerns were raised by some RNs about the tone of the message and we responded to each concern whenever possible. Public feedback was overwhelmingly positive and we used their feedback to inform future messaging.

Welcome to Twitter!

We happily added to our social media presence in 2016 with the launch of our Twitter account. At the end of 2016 we had over 200 followers and used this platform to engage a new group of RNs. During registration renewal, we offered tips for RNs and we're looking forward to exploring new ways to interact with RNs and others. If you haven't followed us yet, find us at @MBCollegeRNs.



Mission, Vision and Values Video

After creating new value statements and updating our mission statement, we knew there was a need to launch these new concepts in an engaging way. If you didn't catch our new video on this topic, visit our website to enjoy it. The video serves as a guiding tool for us during committee meetings, Board meetings and highlights the important work that we do in nursing regulation.

Watch for more videos coming in 2017!



COMMITTEES

COMMITTEES

Statutory Committees

APPOINTMENTS COMMITTEE

Makes recommendations to the Board for members of the College and public representatives to serve on College committees.

Lorne Gibson*
Don Himbeault*

Sonia Kowalewich*
Leanne Matthes, College Staff Liaison

DISCIPLINE COMMITTEE

A quasi-judicial body that conducts hearings and makes findings regarding the practice or conduct of registered nurses. This Committee has the power to make orders and issue a range of sanctions under The Registered Nurses Act.

Onyinye Anyaeji RN
Jennifer Berscheid RN
Cheryl Bilawka RN
Jennifer Colvine RN
Patricia Conroy*
Brian Crawford RN
Sandy Forrest RN
Lily Foubert RN
Michele Groff RN

Lydia Harris RN
Joanna Knowlton*
Ganpat Lodha*
Quinn Menec*
Michelle Prange RN
Charity Reeves RN
Anita Schreiner*
Karen Schnell-Hoehn RN
Doug Simpson*

*DENOTES A PUBLIC REPRESENTATIVE
**DENOTES A NON-PRACTICING MEMBER

EXTENDED PRACTICE ADVISORY COMMITTEE

A committee constituted under the Extended Practice Regulation to make recommendations to the Board regarding the included practices within the regulation, participate in the development and review of standards of practice related to these practices and to review the outcomes of practice audits related to the included practices. The make-up of the Committee is prescribed in the regulation.

Terry Babick MD

Cheryl Dika RN(NP)

Shirley Hiebert RN(NP)

Tara Maltman-Just B.Sc. (Pharm)

Derek Risbey B.Sc. (Pharm)

Tammy Hagyard-Wiebe RN(NP)

Linda Smyrski RN

Anna Ziomek MD

Diana Heywood RN, College Staff Liaison

INVESTIGATION COMMITTEE

Reviews and facilitates the resolution of complaints or reports regarding registered nurses conduct or practice in accordance with The Registered Nurses Act.

Terry Brennan*

Nickie Cool RN

Tania D'Amato*

Mona Livingstone RN

Susan McMahon RN

Linda Pomeroy RN

Stanley Siu*

Mandi Siddiqui RN

Sharon Wickman*

Tracey Legary RN, College Staff Liaison

College Committees

AWARDS COMMITTEE

Makes recommendations regarding the annual professional nursing awards.

Mohsen Abdel-Hadi*

Kimberly Jabusch RN

Catherine Neyedley RN

Asha Pereira RN, Association
of Registered Nurses of Manitoba
representative

Donna Saucier RN, Association
of Registered Nurses of Manitoba
representative

Dayna Robbie, College Staff Liaison

*DENOTES A PUBLIC REPRESENTATIVE
**DENOTES A NON-PRACTICING MEMBER

CONTINUING COMPETENCY COMMITTEE

Addresses matters related to a member's ability to meet the continuing competence program requirements as referred by the Continuing Competence Review Committee or from College staff.

Patricia Adams*

Himalaya Dong*

Kimberly Jabusch RN

Michelle Todoruk-Orchard RN

Jennifer Wellborn RN(NP)

Helen Zielinski RN

Allison Leveque RN, College Staff Liaison

CONTINUING COMPETENCE REVIEW COMMITTEE

Responsible for reviewing continuing competence program materials and making recommendations as part of the annual review.

Elizabeth Andrzejczak RN

Deborah Ballingall Scotten

Jaime Cook RN

Jo-Anne Durocher RN

Loreley Fehr RN

Michele Groff RN

Peter Guanzon RN

Shirley Hiebert RN(NP)

Preetha Krishnan RN(NP)

Joyce Kristjansson RN

Michelle Lagasse RN

Wilma Lank-Wiebe RN

Jacqueline Lauzon RN

Janis Lipski RN

Amber Paziuk RN

Brenda Peters-Watral RN(NP)

Margaret Rauliuk RN(NP)

Margarita Tuokko RN

Jodi Walker Tweed RN

Caroline Wall RN

Anne Wolkenstein RN

Allison Leveque RN, College Staff Liaison

EDUCATION PROGRAM COMMITTEE

Makes recommendations for the Board's consideration regarding matters related to the approval of nursing education programs in Manitoba in accordance with The Registered Nurses Act.

Phyllis Gallimore*

Mary Ann Masesar RN

Asha Pereira RN

Mary-Grace Tesoro-Wilson RN

Joseph Lovelace*

Darlene O'Reilly RN, College Staff Liaison

*DENOTES A PUBLIC REPRESENTATIVE
**DENOTES A NON-PRACTICING MEMBER

REGISTRATION COMMITTEE

Makes recommendations to the Executive Director regarding applications for registration.

Michael Bereziak*

Patricia Conroy*

Patrick Griffith RN

Melany Lowen RN

Holly Mulvihill RN

Donna Obirek*

Karen Wall RN

Barbara Wheeler RN

Suzanne Wowchuk RN, College Staff Liaison

Board of Directors Committees

FINANCE COMMITTEE

Chris Ainley RN

Patricia Bergal RN

Rosemary Chambers*

Marie Edwards RN

Sonia Jablonski-Praznik RN

Lorena McManus

George Prosk*

Katherine Stansfield RN

Steve Lanktree, College Staff Liaison

GOVERNANCE COMMITTEE

Patricia Bergal RN

Marie Edwards RN

Brent Gouthro RN(NP)

Don Himbeault*

Sonia Kowalewich*

Katherine Stansfield RN

Deborah Stewart RN

Leanne Matthes, College Staff Liaison

*DENOTES A PUBLIC REPRESENTATIVE
**DENOTES A NON-PRACTICING MEMBER

Other

PRACTICE AUDITORS

In accordance with The Registered Nurses Act, review a member's registered nursing practice.

Jennifer Ewatski RN

Corinne Katazinski RN

Alexander Kowalski RN(NP)

Lisa Kroeker RN(NP)

Nina Labun RN

Poh-Lin Lim RN

Stephanie Nunes RN

Nicholas Wedel RN

Dorothea Wicklund RN

Marie Allan, College Staff Liaison

INVESTIGATORS

Ember Benson RN

Anne-Marie Brown RN

Janice Epp RN

Patrick Griffith RN

Linda Kawa RN

Ainsley Kullman RN

Sherry Loewen RN

Robert Marshal*

Janice Nesbitt RN

Samantha Psoch

Roberta Thompson RN

Jason Trottier RN

Bernadette Truong RN

Heidi Wiebe RN

Danielle Yaffe RN

Karen Zurba RN

Tracey Legary RN, College Staff Liaison

AGM SCRUTINEERS

Rosemary Chambers*

Lorne Gibson*

Don Himbeault*

Luis Martinez*

*DENOTES A PUBLIC REPRESENTATIVE
 **DENOTES A NON-PRACTICING MEMBER



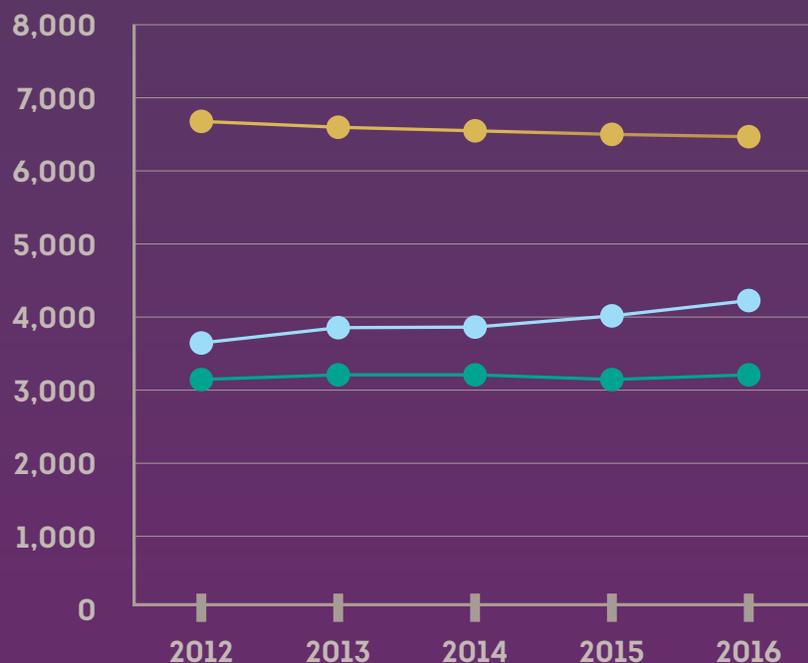
REGISTRATION **STATISTICS**

REGISTRATION STATISTICS

Total Registrations

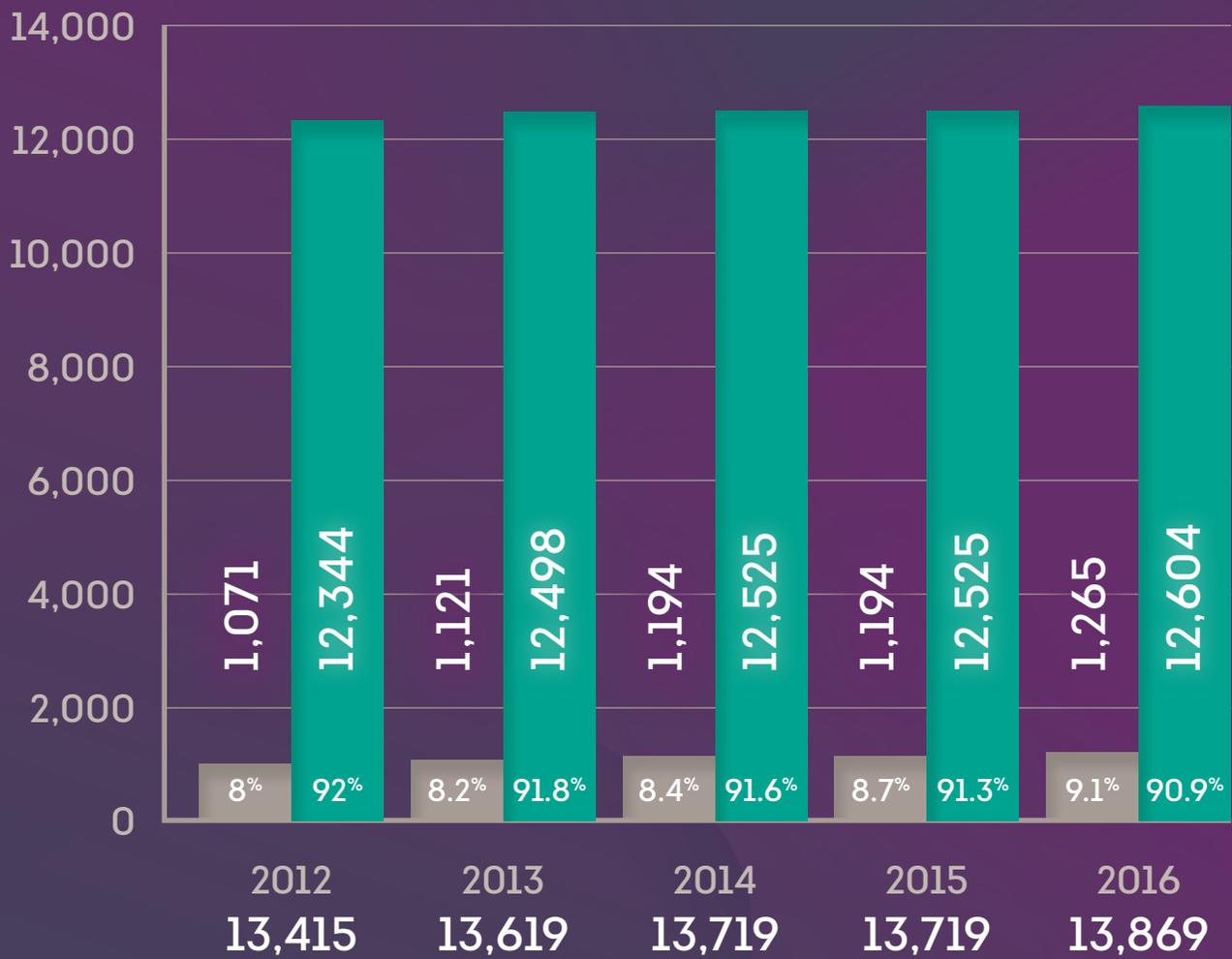
Type	2006	2007	2008	2009	2010	2011	2012	2013	2014	2015	2016
Practicing, RN	11,653	11,864	12,058	12,509	12,929	13,128	13,223	13,407	13,464	13,502	13,634
Extended Practice, RN(NP)	32	49	65	81	101	110	118	131	149	172	187
Non-Practicing	282	255	252	197	178	178	249	263	268	209	171
Graduate Nurse	158	116	102	118	67	77	74	81	46	45	48
Total	12,125	12,284	12,477	12,905	13,275	13,493	13,664	13,882	13,927	13,928	14,040
Total Practicing Only	11,843	12,029	12,225	12,708	13,097	13,315	13,415	13,619	13,659	13,719	13,869

Age of Members

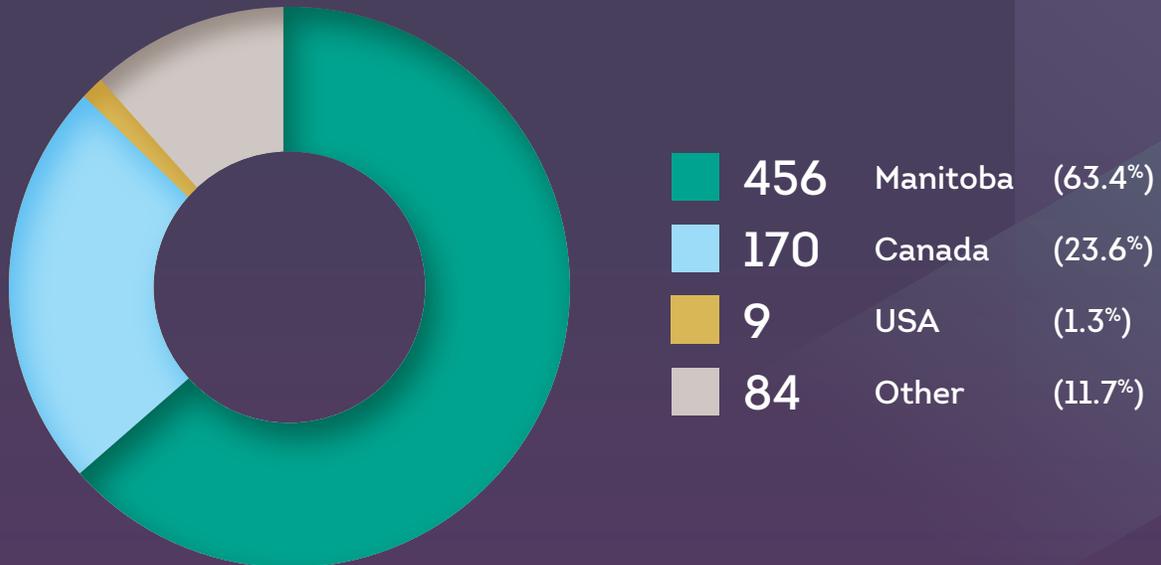


Gender of Practicing Members

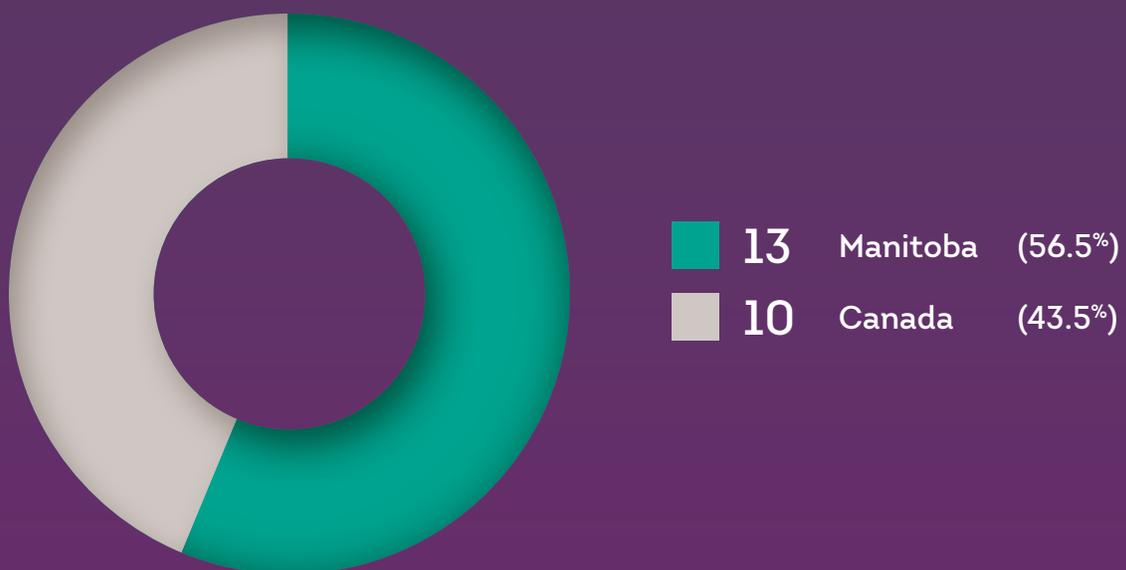
(RNs, RN(NP)s, GNs, GNPs)



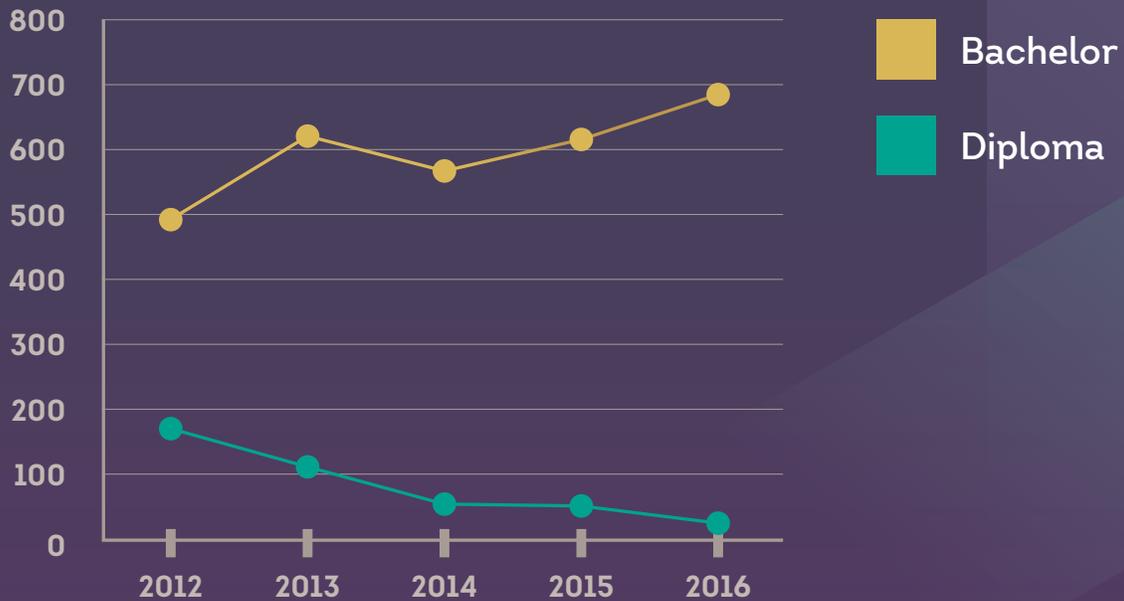
New RN Registrants by Location of Initial Nursing Education



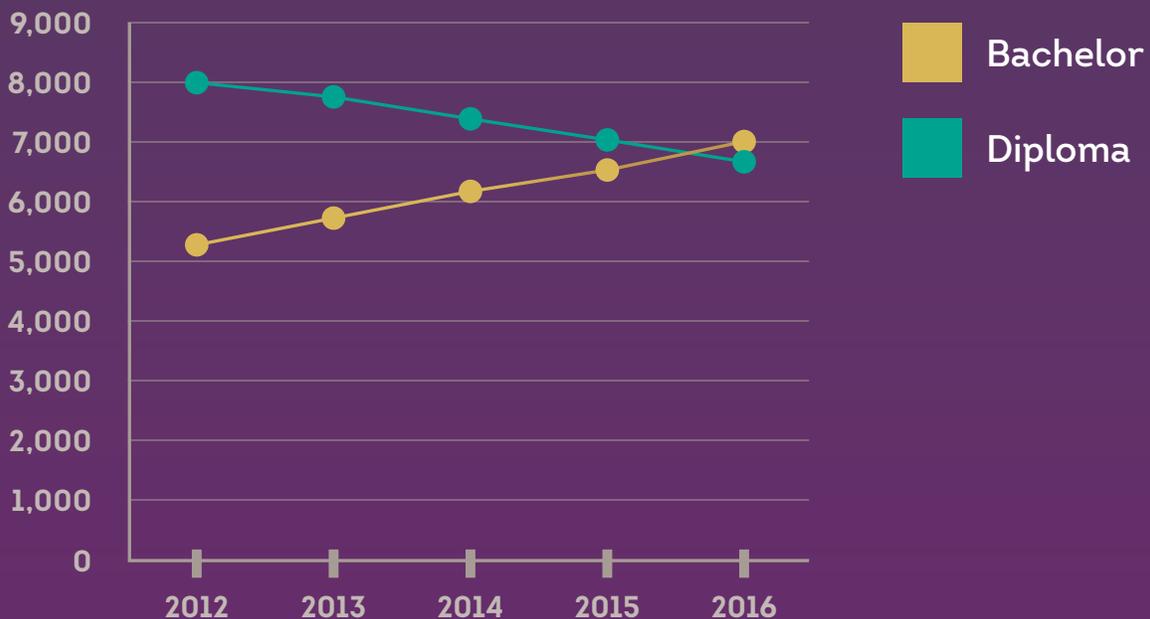
New RN(NP) Registrants by Location of Extended Practice Education

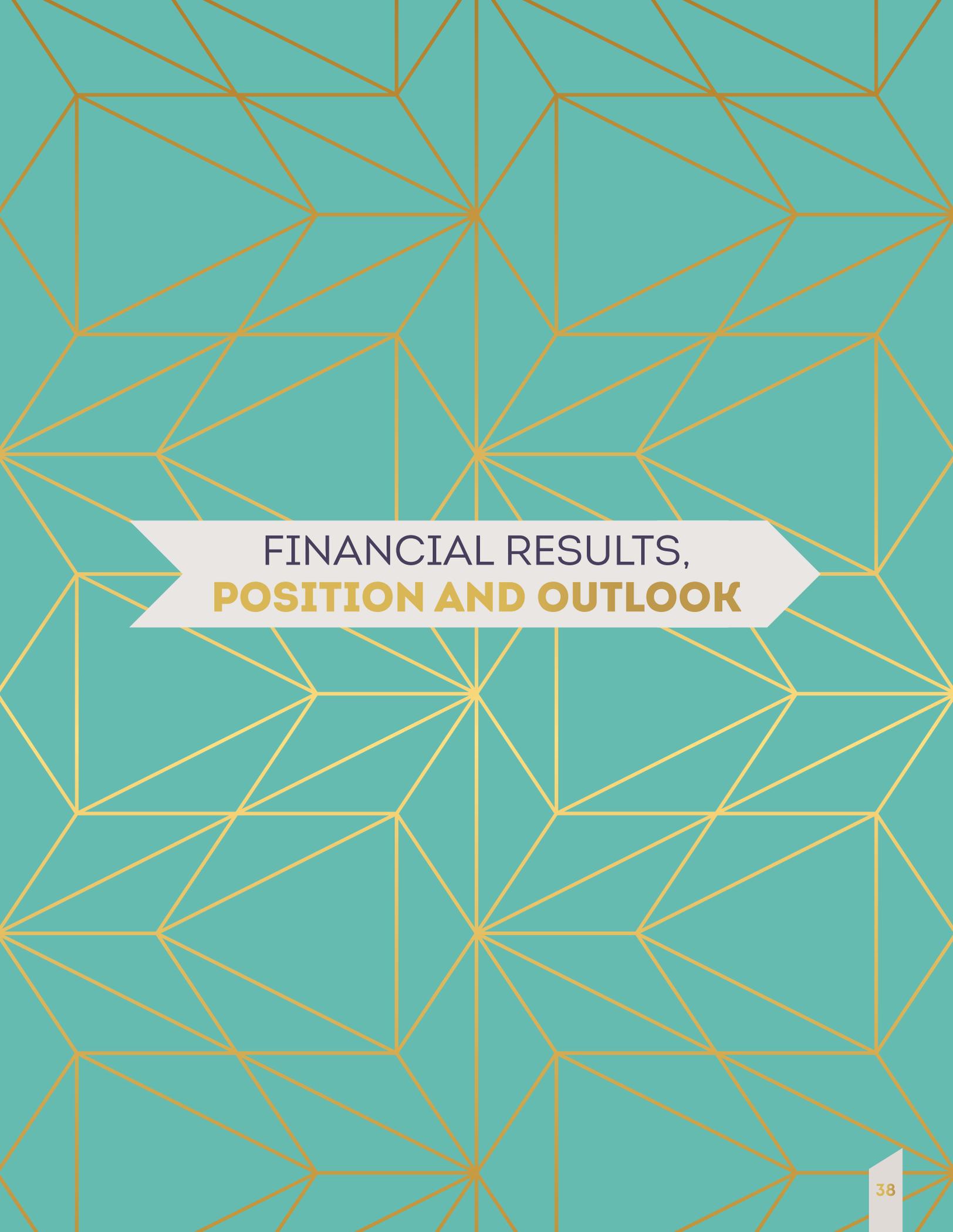


New RN Registrants Entry-to-Practice Education Level



Overall Entry-to-Practice Education Level





FINANCIAL RESULTS,
POSITION AND OUTLOOK

FINANCIAL RESULTS, POSITION AND OUTLOOK

Operating Results

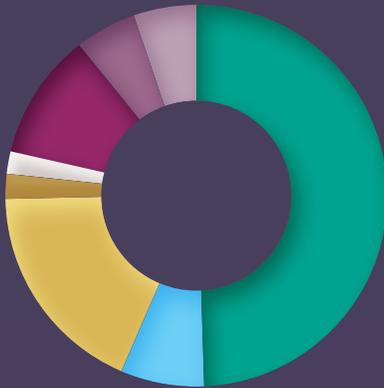
For the year ended Dec. 31, 2016, the College reported a deficiency of revenue over expenses of \$1,235,814. This compares to a deficiency of revenue over expenses of \$758,094 reported for the year ended Dec. 31, 2015. The 2016 deficiency exceeded the budgeted deficiency of \$809,490 by \$426,324. The overall variance for 2016 was primarily the result of two issues: one related to revenue and the other related to expenses.

	2016	2015	Variance
Budgeted deficiency of revenue over expenses	\$809,490	\$568,172	\$(241,318)
Actual deficiency of revenue over expenses	\$1,235,814	\$758,094	\$(477,720)
Variance	\$(426,324)	\$(189,922)	

Overall, total 2016 College **revenue** fell short of budget by \$155,727. Lower than anticipated returns on the College's investment portfolio accounted for \$150,354 of this unfavourable result. Returns for the year were slightly lower than benchmark performance, in addition to the overall investment base being further reduced over the previous 15 months, than was anticipated in the 2016 budget.

For 2016, professional conduct legal costs was the most significant driver of the budget variance on the **expense** side. Discipline legal cost variances accounted for \$239,539 of the total unfavourable expense variance to budget of \$290,832. A higher than anticipated adjustment to the College's pre-retirement liability accrual, resulting from an actuarial valuation, contributed an additional \$36,085 to the unfavourable expense variance.

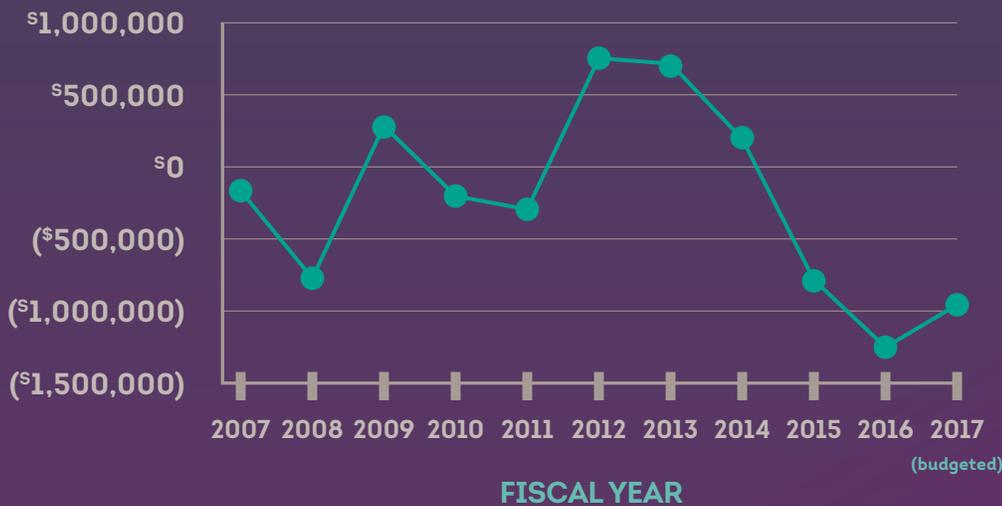
2016 Expense Distribution



■ 49.34%	Staffing	■ 1.95%	Financing
■ 7.16%	Building	■ 10.65%	Professional/Consulting
■ 18.22%	Commitments	■ 5.29%	Depreciation & Amortization
■ 2.10%	Travel and Meetings	■ 5.29%	Other

In order to meet our mandate, we provide a number of programs and services. Those services are powered by our people and ensure we meet our mandate to protect the public.

Excess (Deficiency) of Revenue Over Expenses TEN-YEAR TREND



The following chart shows how the 2016 operating results compare to our results from the last 10 years.

Cumulative Excess (Deficiency) of Revenue Over Expenses SINCE 2012



The following chart shows how operating income initially accumulated after the 2011 registration fee increase. Cumulative income fell in later years as expenses began to exceed revenue.

Financial Position

Total College assets of \$7.157 million at the end of 2016 decreased by \$2.214 million over the same time in the prior year. A decrease in the College's registration fee rates, implemented for 2017, and additional operating losses in 2016, were the primary drivers of this result.

In late 2015, the College's Board of Directors approved a loan in the amount of \$600,000 to be made to the newly incorporated Association of Registered Nurses of Manitoba. This loan was made to assist the Association to operate during its initial one to two year start-up period and is repayable to the College beginning January 2020. Accounting Standards for Not-For-Profit Organizations (ASNPO) require that the balance of the loan be split for financial statement presentation purposes between loan receivable and short and long-term prepaids. More information on this required presentation can be found in the Notes to the Financial Statements.

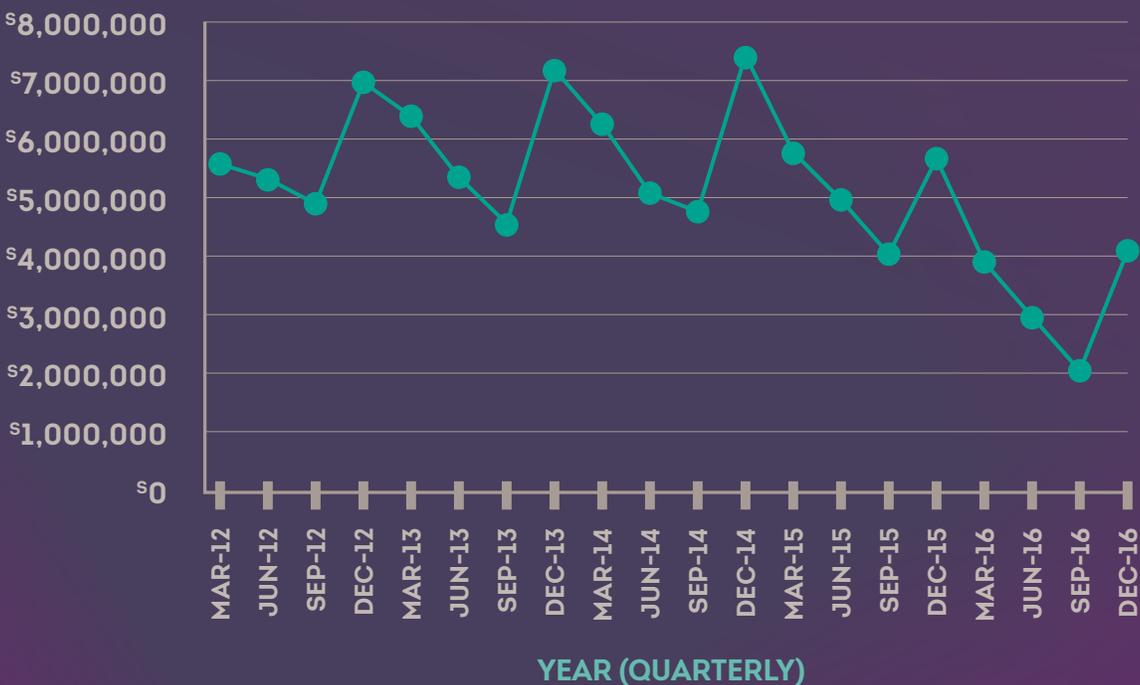
The College's investment balance represents the single largest of the College's assets and is maintained to meet the operating requirements of the College. These requirements include:

- funding operational expenses for the balance of the registration year when fees are not being collected

- funding deficits from year-to-year when fee increases are not enacted
- funding significant capital projects
- acting as a risk management tool to provide funding for contingencies
- mitigating membership fee levels

Because it is used to fund annual operating requirements, the investment balance fluctuates significantly during the year. The highest balances are typically reported at the end of the year after the annual renewal period. The lowest balances are at the end of the third quarter, just before the renewal period begins. The chart below shows the recurring pattern of cash usage inherent in College operations. Note that, in addition to the annual fluctuations in the investment balance, there is also an overall downward trend. In the 2011 fee increase proposal, it was anticipated that investments would initially grow due to positive cash flow generated from operations, but that later in the five-year cycle, the balance would decline, as operating losses consumed cash. The extension of the period without a fee increase for an additional year, poorer than anticipated operating results and additional capital requirements necessitate that the College adopt a new financing model.

Investments at Market FIVE-YEAR TREND BY QUARTER



The College's total liabilities of \$5.136 million at the end of 2016 decreased by \$0.978 million over the same time in the prior year. The primary reason for this reduction was the registration fee decrease for 2017, implemented in 2016. The fees are largely collected in 2016 and are reported on the Statement of Financial Position as deferred revenue until the commencement of the related registration year.

Also of note amongst the College's liabilities is a \$218,780 liability for pre-retirement leave. This liability represents the present value of future obligations related to the retirement of College staff and has increased over 2016, due to a revision in assumptions used to calculate the liability by the College's independent actuary.

Total assets less total liabilities leaves an accumulated surplus or net assets of \$2.020 million, down over 2015 as a result of the 2016 operating loss. This surplus will continue to draw down if operating losses continue in future years.

Net Assets



OUTLOOK



For 2017 and beyond, the College will see a number of issues impacting its operating results and financial position. A few key items are listed below:

- A fee increase for the 2018 registration year will be proposed at the 2017 annual general meeting. This is the first step in our proposed future financial model that will be used to balance the College's finances.
- We will continue to work on enhancements to our new membership database and implement electronic records management. Continuing to improve our information technology efforts will help us better serve our members and mitigate any potential risks.
- In 2017, the College will come under *The Regulated Health Professions Act* (RHPA). A substantial amount of work related to consultations and the development of regulations has already been undertaken. We will continue to look at any future costs that may be associated with this.
- The Board of Directors will set the vision and strategic direction for the College after completing strategic planning in 2018. While we do not know what these directions will be at this time, we will continue to look at cost-saving measures, ways to generate new revenue and how to make our College as fiscally responsible as possible.

FINANCIAL STATEMENTS

FINANCIAL STATEMENTS

For the year ended December 31, 2016

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Tel: 204 956 7200
Fax: 204 926 7201
Toll-free: 866 863 6601
www.bdo.ca

BDO Canada LLP
700 - 200 Graham Avenue
Winnipeg MB R3C 4L5 Canada

Independent Auditor's Report

**To the Board of Directors
College of Registered Nurses of Manitoba**

We have audited the accompanying financial statements of the College of Registered Nurses of Manitoba, which comprise the statement of financial position as at December 31, 2016, and the statements of operations, changes in net assets, and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

Our responsibility is to express an opinion on these financial statements based on our audit. We conducted our audit in accordance with Canadian generally accepted auditing standards. Those standards require that we comply with ethical requirements and plan and perform the audit to obtain reasonable assurance about whether the financial statements are free from material misstatement.

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

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

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of the College of Registered Nurses of Manitoba as at December 31, 2016, and the results of its operations and its cash flows for the year then ended in accordance with Canadian accounting standards for not-for-profit organizations.

BDO Canada LLP

Chartered Professional Accountants

Winnipeg, Manitoba
March 10, 2017

COLLEGE OF REGISTERED NURSES OF MANITOBA

Statement of Financial Position

December 31 **2016** **2015**

Assets

Current Assets

Cash and cash equivalents	\$	511,772	\$	1,200,611
Receivables		48,891		27,945
Prepays and other (Note 2)		<u>167,370</u>		<u>140,879</u>
		728,033		1,369,435
Loan receivable (Note 2)		536,966		514,315
Prepays (Note 2)		42,795		65,499
Investments (Note 3)		4,064,065		5,657,514
Capital assets (Note 4)		890,380		1,111,619
Intangible assets (Note 5)		<u>894,543</u>		<u>652,374</u>
		\$ 7,156,782		\$ 9,370,756

Liabilities and Net Assets

Current Liabilities

Payables and accruals (Note 6)	\$	535,604	\$	477,588
Deferred revenue		<u>4,381,789</u>		<u>5,475,150</u>
		4,917,393		5,952,738
Pre-retirement leave liability (Note 7)		<u>218,780</u>		161,595
		5,136,173		6,114,333

Contingent liability (Note 8)

Commitments (Note 9)

Net Assets

Invested in capital and intangible assets		1,784,923		1,763,993
Unrestricted		<u>235,686</u>		<u>1,492,430</u>
		2,020,609		3,256,423
		\$ 7,156,782		\$ 9,370,756

Approved on behalf of the Board of Directors:

_____ President

_____ Executive Director

The accompanying notes are an integral part of these financial statements.

COLLEGE OF REGISTERED NURSES OF MANITOBA

Statement of Operations

For the year ended December 31	2016	2016	2015
	Budget	Actual	Actual
Revenue			
Registration	\$ 6,048,128	\$ 6,036,757	\$ 5,914,877
Examination	119,406	123,213	110,725
Investment income			
Realized (Note 10)	357,924	114,531	768,142
Unrealized gain (loss) on adjustment to fair value of investments	-	93,039	(472,443)
Other	41,419	43,610	220,868
	<u>6,566,877</u>	<u>6,411,150</u>	<u>6,542,169</u>
Expenses			
Administration	921,284	943,431	1,051,815
Professional conduct	852,890	1,112,223	823,058
Practice	815,661	777,253	773,307
Canadian Nurses Association	730,201	747,454	701,072
Communications	620,467	612,864	681,619
Information technology	441,825	473,830	523,373
Registration	568,404	546,883	503,473
Canadian Nurses Protective Society fees	477,994	482,299	477,514
Building operations	539,852	549,267	469,271
Financial services	470,926	473,263	455,145
Board of Directors	300,385	304,767	320,920
Office services	212,849	220,036	205,195
	<u>6,952,738</u>	<u>7,243,570</u>	<u>6,985,762</u>
Deficiency of revenue over expenses on operations before other items	<u>(385,861)</u>	<u>(832,420)</u>	<u>(443,593)</u>
Other Items			
Amortization of capital assets	262,449	248,977	259,624
Amortization of intangible assets	161,180	154,417	52,944
Loss on disposal of capital assets	-	-	1,933
	<u>423,629</u>	<u>403,394</u>	<u>314,501</u>
Deficiency of revenue over expenses for the year	<u>\$ (809,490)</u>	<u>\$ (1,235,814)</u>	<u>\$ (758,094)</u>

The accompanying notes are an integral part of these financial statements.

COLLEGE OF REGISTERED NURSES OF MANITOBA Statement of Changes in Net Assets

For the year ended December 31, 2016

	Invested in Capital and Intangible Assets	Unrestricted	2016	2015
Net assets, beginning of year	\$ 1,763,993	\$ 1,492,430	\$ 3,256,423	\$ 4,014,517
Deficiency of revenue over expenses for the year	(403,394)	(832,420)	(1,235,814)	(758,094)
Interfund Transfers				
Capital assets acquired (\$212,482 in 2015)	27,738	(27,738)	-	-
Intangible assets acquired (\$114,197 in 2015)	396,586	(396,586)	-	-
Net assets, end of year	\$ 1,784,923	\$ 235,686	\$ 2,020,609	\$ 3,256,423

The accompanying notes are an integral part of these financial statements.

COLLEGE OF REGISTERED NURSES OF MANITOBA

Statement of Cash Flows

For the year ended December 31	2016	2015
Cash Flows from Operating Activities		
Deficiency of revenue over expenses for the year	\$ (1,235,814)	\$ (758,094)
Adjustments for items not affecting cash		
Amortization of capital assets	248,977	259,624
Amortization of intangible assets	154,417	52,944
Amortization of deferred lease inducements	-	(19,688)
Loss on disposal of capital assets	-	1,933
Unrealized (gain) loss on adjustment to fair value of investments	(93,039)	472,443
	(925,459)	9,162
Changes in non-cash operating working capital balances		
Receivables	(20,946)	(3,140)
Prepays and other	(26,438)	(6,485)
Payables and accruals	58,016	69,118
Deferred revenue	(1,093,361)	49,889
Pre-retirement leave liability	57,185	(15,884)
	(1,951,003)	102,660
Cash Flows from Financing and Investing Activities		
Investment acquisitions	(2,086,251)	(2,260,693)
Investment dispositions	3,772,739	3,485,337
Capital assets acquisitions	(27,738)	(212,482)
Intangible assets acquisitions	(396,586)	(114,197)
Proceeds on disposal of capital assets	-	333
Loan advance	-	(600,000)
	1,262,164	298,298
Net (decrease) increase in cash and cash equivalents during the year	(688,839)	400,958
Cash and cash equivalents, beginning of year	1,200,611	799,653
Cash and cash equivalents, end of year	\$ 511,772	\$ 1,200,611

The accompanying notes are an integral part of these financial statements.

COLLEGE OF REGISTERED NURSES OF MANITOBA

Notes to Financial Statements

For the year ended December 31, 2016

1. Nature of Operations and Summary of Significant Accounting Policies

a. Nature and Purpose of Organization

The College of Registered Nurses of Manitoba ("College") has as its mission to protect the public through regulation, practice support and education of registered nurses. The Registered Nurses Act and Regulations of the Province of Manitoba sets out the College's legal authority to regulate registered nurses, registered nurses (extended practice) and graduate nurses. The College is a not-for-profit organization exempt from taxes under the Income Tax Act.

b. Basis of Accounting

These financial statements have been prepared in accordance with Canadian accounting standards for not-for-profit organizations ("ASNPO").

c. Revenue Recognition

The College follows the deferral method of accounting for contributions.

Registration fees revenue are generally recognized as revenue in the period that corresponds to the registration year to which they relate.

Examination fees received are deferred and recognized as revenue in the year the applicant completes the exam.

Investment revenue is recognized as revenue in the year earned and includes gains and losses resulting from changes in the fair market value of investments.

Contributed services are not recognized in the financial statements. All other revenues are recognized in the year earned.

d. Cash and Cash Equivalents

Cash and cash equivalents consist of cash on hand, bank balances, and credit card and debit card settlements due to the College.

e. Capital Assets

Capital assets are stated at cost less accumulated amortization. Amortization is recorded beginning in the later of the month of acquisition or when the asset is available for use. Amortization based on the estimated useful life of the asset is calculated as follows:

Equipment	20% - 33% declining balance basis
Leasehold improvements	10 years straight-line over the term of the lease plus one renewal period

COLLEGE OF REGISTERED NURSES OF MANITOBA

Notes to Financial Statements

For the year ended December 31, 2016

1. Nature of Operations and Summary of Significant Accounting Policies (continued)

f. Intangible Assets

Intangible assets consist of computer software. Intangible assets are stated at cost less accumulated amortization. Amortization is recorded beginning in the later of the month of acquisition or when the asset is available for use. Amortization based on estimated useful life of the asset is calculated on a straight-line basis over a 3-year or 5-year period.

g. Pension and Pre-retirement Leave Benefits

The College provides pension benefits and pre-retirement leave benefits to its employees.

Pre-retirement leave benefits are provided to certain qualifying employees. The benefits are provided under a final pay plan. The costs of benefits earned by employees are charged to expenses as services are rendered. The costs are determined using the projected benefit method and reflect management's best estimates of the length of service, salary increases and ages at which employees will retire. Gains and losses are recognized in income immediately.

Pension benefits are provided to substantially all of the College employees. The College is described as a "matching employer" and its contribution toward the pension benefits is limited to matching the employees' contributions to the pension plan described in note 7.

h. Financial Instruments

Financial instruments are recorded at fair value when acquired or issued. In subsequent periods, financial assets with actively traded markets are reported at fair value, with any unrealized gains and losses reported in income. All other financial instruments are reported at cost or amortized cost less impairment, if applicable. Financial assets are tested for impairment when changes in circumstances indicate the asset could be impaired. Transaction costs from the acquisition, sale or issue of financial instruments are expensed for those items remeasured at fair value at each balance sheet date and charged to the financial instrument for those measured at amortized cost.

i. Use of Estimates

The preparation of financial statements in accordance with Canadian accounting standards for not-for-profit organizations requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities at the date of the financial statements, and the reported amounts of revenue and expenses during the reporting period. Actual results could differ from management's best estimates as additional information becomes available in the future.

COLLEGE OF REGISTERED NURSES OF MANITOBA

Notes to Financial Statements

For the year ended December 31, 2016

2. Association Loan

During the prior year, the College extended a loan to the Association of Registered Nurses of Manitoba Inc. ("Association") in the amount of \$600,000. The loan is secured by a promissory note, with the College reserving the right to ask the Association to provide security at any point in time during the term of the loan. The loan is interest-free unless repayment is demanded, at which time interest would accrue at prime plus 1%, with an effective rate of 3.70% as at December 31, 2016. Repayment is scheduled to commence on January 1, 2020 in the amount of \$50,000 per year. The loan would be considered in default if financial covenants stipulated in the loan agreement are breached, repayment terms are breached, or funds are not used in accordance with the business plan and corporate objectives as initially defined.

The interest-free loan presented in the financial statements has been discounted as required by ASNPO using a discount rate of 3.70%. As at December 31, 2016, the loan receivable balance is \$536,966, with \$20,239 presented as current prepaids and \$42,795 as long-term prepaids.

3. Investments

In accordance with its investment policy, the College maintains short-term and long-term investment portfolios to meet its liquidity and long-term needs. Investments consist of money market, debt instruments and equity instruments pooled funds. Investments are reported at fair value on the statement of financial position and are comprised of the following:

	2016	2015
Short-term Investments		
Money market fund	\$ 796,963	\$ 912,733
Short-term fixed income	983,044	601,041
Total short-term investments	1,780,007	1,513,774
Long-term Investments		
Canadian equity fund	375,103	659,520
Canadian equity income and growth fund	525,125	326,697
Fixed income fund	1,212,988	1,952,173
International equity fund	170,842	1,205,350
Total long-term investments	2,284,058	4,143,740
Total investments	\$ 4,064,065	\$ 5,657,514

COLLEGE OF REGISTERED NURSES OF MANITOBA

Notes to Financial Statements

For the year ended December 31, 2016

4. Capital Assets

	2016			2015		
	Cost	Accumulated Amortization	Net Book Value	Cost	Accumulated Amortization	Net Book Value
Equipment	\$ 1,177,372	\$ 926,124	\$ 251,248	\$ 1,149,634	\$ 848,337	\$ 301,297
Leasehold improvements	1,383,566	744,434	639,132	1,383,566	573,244	810,322
	\$ 2,560,938	\$ 1,670,558	\$ 890,380	\$ 2,533,200	\$ 1,421,581	\$ 1,111,619

5. Intangible Assets

	2016			2015		
	Cost	Accumulated Amortization	Net Book Value	Cost	Accumulated Amortization	Net Book Value
Computer software	\$ 1,740,549	\$ 846,006	\$ 894,543	\$ 816,354	\$ 691,589	\$ 124,765
Computer software under development	-	-	-	527,609	-	527,609
	\$ 1,740,549	\$ 846,006	\$ 894,543	\$ 1,343,963	\$ 691,589	\$ 652,374

6. Payables and Accruals

Included in payables and accruals is \$5,409 (\$12,026 in 2015) in government remittances payable relating to payroll tax.

7. Employee Future Benefits

Multi-employer Defined Benefit Pension Plan

Substantially all of the employees of the College are members of the Healthcare Employees Pension Plan, a successor to the Manitoba Health Organization Inc. Plan (the "Plan"), which is a multi-employer defined benefit pension plan available to all eligible employees of the participating members of the Plan. Plan members will receive benefits based on the length of service and on the average of annualized earnings during the best five years of the last ten years prior to retirement, termination or death, that provides the highest earnings.

Pension assets consist of investment grade securities. Market and credit risk on these securities are managed by the Plan by placing plan assets in trust and through the Plan investment policy.

COLLEGE OF REGISTERED NURSES OF MANITOBA

Notes to Financial Statements

For the year ended December 31, 2016

7. Employee Future Benefits (continued)

Multi-employer Defined Benefit Pension Plan (continued)

Pension expense is based on Plan management's best estimates, in consultation with its actuaries, of the amount, together with the contributions by employees, required to provide a high level of assurance that benefits will be fully represented by fund assets at retirement, as provided by the Plan. The funding objective is for employer contributions to the Plan to remain a constant percentage of employees' contributions.

Variances between actuarial funding estimates and actual experience may be material and any differences are generally to be funded by the participating members. The most recent actuarial valuation of the Plan as at December 31, 2015 indicates a solvency deficiency. Special payments will be made to the plan over the next five years, out of current contributions in those years. Contributions to the Plan made during the year by the College on behalf of its employees amounted to \$268,854 (\$233,943 in 2015) and are included as expenses in the statement of operations.

Pre-retirement Leave Plan

Employees are granted pre-retirement leave benefits based on meeting specific criteria. Pre-retirement leave benefits liability is estimated by management using actuarial valuation to be \$218,780 as at December 31, 2016 (\$161,595 at December 31, 2015) which are presented as a liability on the statement of financial position.

8. Contingent Liability

One complaint has been filed against the College with the Manitoba Human Rights Commission regarding the registration of one applicant. At the time of approval of these financial statements, the outcome of the complaint is not determinable. Accordingly, no provision for settlement, if any, has been recorded in these financial statements. Settlement amounts, if any, will be charged to operations once a settlement amount has been determined. The College assesses the exposure to the College to be limited.

9. Commitments

Annual Contributions for Fees and Services

As a member of the Canadian Council of Registered Nurse Regulators (CCRNRR), the College is required to pay annual fees to CCRNR. These fees are payable in March. The College is committed to pay fees to the CCRNR of approximately \$24,375 in 2017.

The College is committed to make an annual contribution of \$1 per active practicing member to the Canadian Nurses Foundation (CNF). The College anticipates contributions to CNF of approximately \$13,500 in 2017.

COLLEGE OF REGISTERED NURSES OF MANITOBA

Notes to Financial Statements

For the year ended December 31, 2016

9. Commitments (continued)

Premises

The College has entered into an agreement to lease its premises in the amount of \$255,000 annually expiring in the year ending December 31, 2019, which includes minimum rent plus realty taxes, insurance and utilities.

10. Net Realized Investment Income

Net realized investment income for the year is comprised of the following:

	<u>2016</u>	<u>2015</u>
Interest, dividends and capital gains dividends	\$ 118,377	\$ 241,723
Gain (loss) on disposition of investments	<u>(3,846)</u>	<u>526,419</u>
	<u>\$ 114,531</u>	<u>\$ 768,142</u>

11. Capital Management

The College's objectives when managing capital are:

- a) to safeguard its ability to continue as a going concern, and
- b) to continue to meet its obligations under The Registered Nurses Act, particularly with regard to the protection of the public.

The College manages its capital to achieve these objectives by:

- a) considering economic conditions and the risk characteristics of underlying assets;
- b) establishing annual operating and capital budgets and monitoring related performance;
- c) establishing rolling performance objectives for excess of revenue over expenses and cash flow and monitoring related performance;
- d) maintaining liquid assets at least sufficient to fund operating expenses for up to eight months; and,
- e) controlling operating costs relative to available revenue.

The College does not distribute its capital and does not establish quantitative return on capital criteria.

COLLEGE OF REGISTERED NURSES OF MANITOBA

Notes to Financial Statements

For the year ended December 31, 2016

12. Financial Instrument Risk Management

The College, through its financial assets and liabilities, is exposed to various risks in the normal course of operations. The College's objective in risk management is to optimize the risk return trade-off, within set limits, by applying integrated risk management and control strategies, policies and procedures throughout the College's activities. The following analysis provides a measurement of those risks.

Credit Risk

Credit risk is the risk that the College will incur a loss due to the failure by its debtors to meet their contractual obligations. Financial instruments that potentially subject the College to significant concentrations of credit risk consist primarily of cash and cash equivalents, receivables and investments. The College is not exposed to significant credit risk as cash and cash equivalents are held in operating accounts, receivables are typically paid when due, and investments are diversified. In addition, the College follows its investment policy to monitor the investments in an effort to minimize its exposure to credit risk.

Liquidity Risk

Liquidity risk is the risk that the College will not be able to meet its obligations as they fall due. The College maintains adequate levels of working capital to ensure all its obligations can be met when they fall due by maintaining a portion of its investments in money market pooled funds which are highly liquid.

Market and Interest Rate Risk

Market risk is the risk that the value of an investment will fluctuate as a result of changes in market prices, whether those changes are caused by factors specific to the individual investment or factors affecting all securities traded in the market. Interest rate risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in market interest rates. The College is not exposed to significant interest rate risk as cash and equivalents are held in short-term products, and investments are diversified. The College is exposed to market risk and follows its investment policy to monitor the investments in an effort to safeguard against market fluctuations.

Foreign Exchange Risk

Foreign exchange risk is the risk that the fair value or future cash flows of a financial instrument will fluctuate because of changes in foreign exchange rates. The College is exposed to foreign exchange risk since it holds a portion of its investments in an international equity fund. The College follows its investment policy to monitor the investments in an effort to minimize its exposure to foreign exchange risk.

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890 Pembina Hwy
Winnipeg, MB R3M 2M8

Phone: 204 774 3477
Toll-free: 1 800 665 2027

Fax: 204 775 6052
Email: info@crnm.mb.ca

crnm.mb.ca