

2008 ANNUAL REPORT



COLLEGE OF
LICENSED PRACTICAL NURSES
OF ALBERTA

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OUR MISSION

To regulate and lead the profession in a manner that protects and serves the public through excellence in Practical Nursing.

ABOUT THE COLLEGE

The College of Licensed Practical Nurses of Alberta (CLPNA) is the regulatory body for the province's almost 8000 Licensed Practical Nurses.

College members play a vital role in Alberta's health care system and provide health care services in a variety of settings and contexts including, but not limited to, Acute Care, Maternal Child, Pediatrics, Continuing Care, Mental Health, Public Health, and Community Agencies.

CLPNA regulates the profession by setting entry-to-practice requirements, establishing, promoting and enforcing standards of practice and conduct, and enhancing the care provided by members of the profession through the Continuing Competency Program.

CLPNA supports members in meeting their accountability for quality care through our quarterly publication (CARE), the website (www.clpna.com), and practice consultation.



2008 CLPNA COUNCIL

(L-R, back row): Jenette Lappenbush, LPN; Donna Adams, LPN; Marie Boczkowski, LPN; Kristina Maidment, Vice-President; Robert Mitchell, Public Member; Jo-Anne Macdonald-Watson, LPN; Peter Brown, LPN; Ted Langford, Public Member; Peter Bidlock, Public Member

(L-R, front row): Linda Stanger, Executive Director/Registrar CLPNA; Hugh Pedersen, President; Kristen Shardlow, LPN



The Health Professions Act (HPA) was established to set a standard of continuity in the regulation of all health care providers. Each regulated profession is expected to establish standards to ensure their registrants maintain a high standard of care, with professionalism and competence. These core values are the foundation for all self governing professions. Our College holds the same unwavering commitment to serving and protecting the public with excellence in nursing practice.

It is with this focus that I present the 2008 Annual Report for the College of Licensed Practical Nurses of Alberta.

I counted about eighty-two primary care facilities in Alberta. Long Term Care Facilities would most likely be double that number. In all of those facilities, and wherever health care is delivered, there are Practical Nurses working. Licensed Practical Nurses work in the largest publicly funded organization in Alberta. Increasingly, we have the support of the unit managers who encourage the LPN to use all of their knowledge and skills and further develop their critical thinking. In order to keep a perspective on the costs of Health Care, it was recently calculated at \$1.2 million per hour. These facts and more numbers are available on the Alberta Health Services web site.

In the past year we reviewed and maintained our Mission and Vision statements. During our strategic planning session we evaluated our Value Statements against the HPA mandate and found them to be compatible. We completed the process of publishing revised Standards of Practice and Code of

Ethics. We are on track. The number of registrants has grown due to additional funding for the development of Internationally Educated Nurses coming to our province.

In order for us to function as a College and maintain our standards it is vital we have the support of you, the LPN membership. Thank you for all the work you do. Thank you to the many LPN's who volunteer time and energy to serve on the various College committees. Thank you to the very committed group of individuals on Council that work so diligently on your behalf bringing new and innovative ideas. This year the Council bid farewell to Ruth Wold as she completed her term as President. We are grateful for her leadership and dedication as President for the last four years. Thank you Ruth, for your hard work and the valuable contribution you have made to our profession in Alberta and on a national level. I'm greatly indebted to you for the Council Handbook that serves as my guide in my new role. Ruth tells me that her Saturday mornings now involve a hot coffee and the morning paper.

The hub of the CLPNA is in the office where the staff work diligently on our behalf. Every successful organization has a group of people that provide leadership. We are privileged to have an Executive Director that can balance the art of daily operations and futuristic thinking. I wish to thank Linda Stanger for her constant awareness of where we are going and providing a plan on how to get there. Linda, your circle of influence is evident both locally and nationally among our many partners. Evident too is your unwavering commitment to serving the people of Alberta

through the continual development and promotion of our profession.

In 2008 the Government of Alberta dissolved all the Health Regions and began operating under one Board. So far we have little information to go on as to the direction we get to travel. The one direction that is an absolute is that people will still be getting sick, hurt and injured. They will need a nurse with compassion, respect and high degree of knowledge and skill to take care of them. The Licensed Practical Nurse will be there.

I am so very proud to be an LPN and proud of the Licensed Practical Nurses of Alberta. I have on my desk an outdated "Nursing Skills Record" book. We still do nursing skills and we need to continually hone those skills but we are much more than that. We are critical thinking nurses. Paperless charting, computerized monitors, telemetry and whatever new electronic program that is in our future, will never take the place of a competent Licensed Practical Nurse. Our future is as good as we want to make it. Today we are closer to being a nurse of choice than we have ever been. We will have some rumble strips in 2009 but our previous leaders taught us that the hum of the tires on rumble strips are mere indicators.

If you can not hear the hum you need to evaluate if you are right on track or are just not going anywhere.

Sincerely,
Hugh Pedersen
President



Peter Bidlock



Ted Langford



Robert Mitchell

The year 2008 was extremely busy and a productive year for the CLPNA. Under the exceptional leadership of the Executive Director, Linda Stanger, the College has been very successful in meeting its mandate to protect and serve the public. The College organized a successful move to a new office location, in north-central Edmonton. The office is very functional with a pleasing professional appearance. We compliment Linda and all her staff for a job well done.

A number of activities and initiatives throughout 2008 serve to highlight the tremendous effort and success of the College: they accommodated an 8% increase in LPN registrations in the province, maintained effective stakeholder relationships provincially and beyond, pursued a number of strategic

initiatives to address nursing shortages across the province, and further enhanced the Annual Conference. We particularly wish to note the success of the International Educated Nurses project carried out in collaboration with Capital Health and Norquest College which helps to increase the number of nurses serving Albertans.

As public members of the Council, we note that the day to day operations of the College are managed in a prudent and fiscally responsible manner. We can confirm that the management of the College and its members is done in a manner that serves and protects the 'Public' with the intent of providing Albertans with quality health care.

We continue to be impressed with the commitment and integrity of our fellow Council

colleagues. The LPN members elected to Council bring a real 'down to earth' perspective to Council discussions, helping to ensure that LPNs provide competent and safe care to their patients.

We are pleased to report that the CLPNA continues to be effectively managed and is well prepared to help address the challenges facing the public health system and the practical nurse profession.

Respectfully submitted,
Peter Bidlock
Ted Langford
Robert Mitchell



The past year was a historic year for the Health system in Alberta and for the CLPNA, as a result. We are seeing the reorganization of health services in favour of a new patient centered model focused on increasing quality, efficiency and sustainability. We have seen changes to the Health Professions Act that governs self-regulating bodies resulting in increased accountabilities, and increased ease with which government can be directly involved in regulatory process. Monumentally we have seen Canada's Premiers agree to implement unrestricted labour mobility for all professions early in 2009. The world economy is in upheaval and fiscal accountability which has always been important, has taken on new significance everywhere.

The information presented throughout this annual report highlights key initiatives the CLPNA has undertaken in 2008 to regulate and lead the profession in a manner that protects and serves the public during this time of change and uncertainty.

Health Human Resource (HHR) shortages continue. The CLPNA participated with government, other regulators, employers and educators in developing a HHR Strategy for Alberta. The CLPNA, in collaboration, is currently contributing to priority actions within that strategy as follows. The College is actively involved in a project with Capital Health and NorQuest College to recruit and license Philippine nurses as LPNs. Currently we have facilitated the integration of over 300 Internationally Educated Nurses (IENs) through this program and these nurses are making a significant contribution to health care in this province.

A proposal for funding was submitted to Alberta Health and Wellness by CLPNA and Bow Valley College to redesign the current refresher program, and provide financial support for lapsed LPNs to return to the profession. The

CLPNA, with support of Alberta Employment and Immigration, has participated in International recruitment. In addition we began work on a domestic recruitment campaign into the profession with roll out to occur in spring 2009. To address the current and predicted shortage of Operating Room (OR) nurses due to retirements, Alberta Health and Wellness provided grant funding of \$100,000 (one hundred thousand dollars) from the Health Workforce Action Plan to support post basic OR specialty education of LPNs. This fund is managed by the Fredrickson McGregor Foundation. Information is available on the CLPNA website and LPNs are encouraged to consider a post basic specialty in OR and accessing this fund to support education.

In partnership with the Fredrickson McGregor Education Foundation, financial support for LPNs to complete post basic education continued with nearly 1000 LPNs accessing this fund since its inception. Due to the turmoil in our economy these funds have been severely impacted resulting in fewer dollars available and a refocusing by the foundation on short term programs designed to enhance current practice and/or prepare LPNs to assume new and different roles in an evolving system.

The College continues to support and participate in research initiatives both provincially and nationally that informs our profession and contributes to a more efficient and effective health care system.

Nationally the College maintains a strong relationship with our counterparts in Atlantic and Western Canada through active participation in the Canadian Council for Practical Nurse Regulators, and with Quebec, Ontario and the Territories through joint initiatives related to Labour Mobility. In spring 2008, implementation of the Alberta competency profile template was completed in the four Atlantic Provinces. With the western provinces who had implemented in

2004, we now have eight jurisdictions defining LPN practice through this approach.

The CLPNA experienced a net gain in the number of registrants for the 2008 year. These gains came largely from the IEN community. Government has added seats to PN programs and enrolments are up, however the seats are undersubscribed. The number of practical nurses graduating in Alberta remains greater than the number leaving the profession however retirement numbers are projected to increase over the next few years, due to the baby boomer population leaving the workforce. This will require increased numbers of graduates to continue the current growth within the profession.

In June the College relocated to St. Albert Trail Place, 13163 146 Street, Edmonton. The new facility is a smaller space with a functional design that supports growth, is easily accessible for membership and minimizes the burden of increasing rental rates. A sincere "thank you" to Tamara Richter who led this project, and to the staff for a seamless transition!

The CLPNA has accomplished much in 2008 in support of our profession, the health system and the people we serve. It was a year of transition as we said goodbye to Ruth Wold our president for the past four years, and welcomed incoming president Hugh Pedersen. Through well considered preparation this transition has been very smooth. Thank you to both Ruth and Hugh! Through visionary leadership of the Council, dedication of our staff, committed efforts of our volunteers and partners, and continued excellence in practical nursing by our registrants, CLPNA completed another successful year. Thank you to everyone!

With respect and appreciation,
Linda Stanger
 Executive Director/Registrar

Throughout 2008 LPN practice has continued to evolve. CLPNA was involved in discussion in all regions to guide practice across clinical settings, with new opportunities in many areas including; acute psychiatry, emergency departments, corrections and oncology. Full implementation of expanded roles built on the philosophies of the Health Professions Act continues, although it remains inconsistent in many areas.

In settings where full role optimization exists, nursing roles are generally extending into a broader range of services. The most common changes in LPN practice in 2008 have been in the competency area of infusion therapy. Education has been provided by many employers with hundreds of LPNs now transitioning into a more comprehensive role in medication administration, specifically the mixing and administering of intravenous (IV) medication and starting peripheral IVs.

As the infusion therapy role for LPNs has evolved, increasing discussion of current practices related to IV push medications has occurred. Settings are transitioning to direct IV push for specific medications and have requested that CLPNA reconsider the parameter set around this competence for LPNs. After examining a number of factors the CLPNA Council approved a change to LPN scope of practice to now include direct IV push as an "Additional Competency." This competence area must be supported within the specific practice setting through policy, procedure, and education, including theory, lab, and clinical supports, to ensure safe practice.

In keeping with practice across the country and the current changes in Alberta, the Council approved a change to LPN basic education in relation to IV starts. New graduates from 2010 forward will now acquire these competencies prior to graduation.

Opportunity for LPNs is increasing in primary nursing with nursing models of care that facilitate assignments including the full spectrum of care for patients. This is a practice that is expected to

continue within the direction of the current ministry. Employers will be further challenged to examine roles and functions of their teams based on the goals of ensuring the right provider for the right patient at the right time.

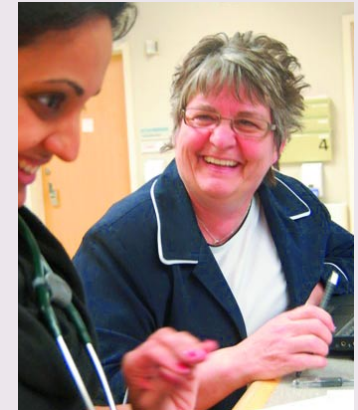
As practice changes for the entire nursing team, increased need has been evident for clarification of how nursing teams work together and who on the team can and should do what. We continue to work with the other nursing colleges clarifying scope of practice, roles, and collaborative nursing practice and multiple sessions have been held throughout Alberta. This is expected to continue into the future to support all nurses.

CLPNA Professional Practice Sessions are provided on a request basis and address the themes of leadership, accountability, responsibility, autonomy and continuing competence. These sessions are custom made for the setting depending upon the learning needs of the LPNs.

In July 2008 the CLPNA Practice department began tracking inquiries from LPNs, employers and the public related to LPN practice. During this six month period 979 inquiries were received. These inquiries covered the wide range of LPN practice with a primary focus in the areas of professionalism (includes scope of practice, continuing competence, accountability), medication administration, nursing knowledge and self-employed practice.

Tracking continues with this information being used to determine trends in practice and requirements for increased clarity or guidelines, and educational needs of members and employers.

Practice support for members and employers has been enhanced through the CLPNA website, CARE Magazine, and ReguLink, with resources related to education, research and practice enriched in the last year.



As an LPN for over 30 years, she's worked in every area of the hospital, in facilities all over Alberta. "It's a matter of LPNs spreading their wings."

Cheri Eil, LPN
(N & V Volume 22, 1st Edition, Spring 2008)

"Having all health professionals working to their full extent of education, skill and experience is an important first step in the realignment process."

Minister Ron Liepert
(CARE, Volume 22, 4th Edition, Winter 2008)

There's a sum that is greater than the parts when many provinces work together – it creates a more powerful voice that can carry the LPN messages.

Executive Message
(N & V Volume 22, 1st Edition, Spring 2008)

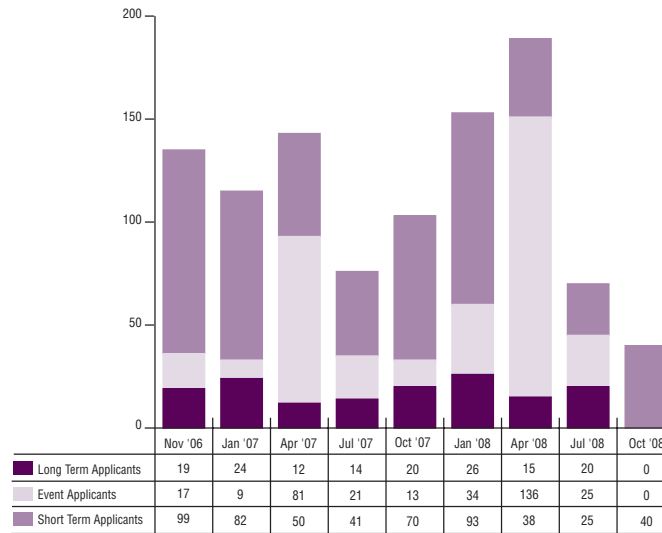
FREDRICKSON-McGREGOR EDUCATION FOUNDATION FOR LICENSED PRACTICAL NURSES OF ALBERTA

In Spring 2006, the College of Licensed Practical Nurses of Alberta received a \$3 million dollar endowment and a \$300,000 transitional fund from Alberta Health and Wellness to support the continuing education needs of LPNs. The funds are administered by Fredrickson-McGregor Education Foundation for LPNs.

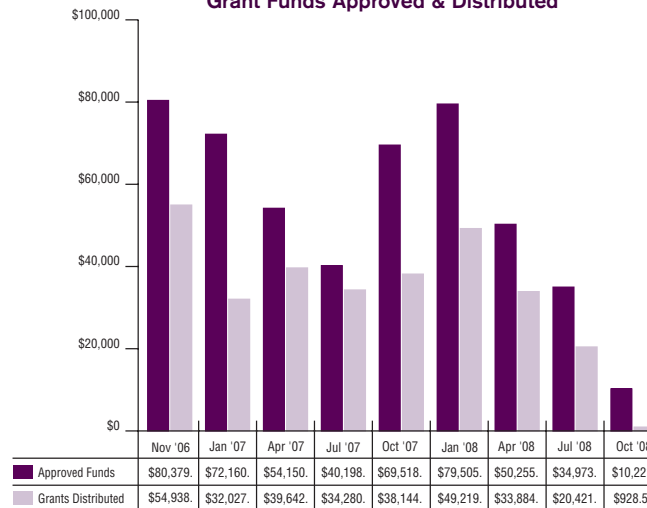
Since the Education Grant Program began in September 2006, the Fredrickson-McGregor Education Foundation for LPNs has approved 1024 applications for a total of \$491,362.86 in grants, and distributed 62% of the approved funds. There have been nine Application Deadlines to date. Unredeemed grant funds are primarily due to non-completion of courses or programs.

Due to recent economic downturn, the endowment for the Grant Program of the Fredrickson-McGregor Education Foundation for LPNs has declined in value and the interest from which Grant funds are distributed has diminished. Beginning with the October 31, 2008 Application period, the Foundation suspended approval on courses in the categories of Event Funding (non-credit courses) and Long Term Funding (Bachelor-degree courses) pending the growth of the endowment. Members are invited to continue applying for Short Term Funding, especially for courses such as Operating Room, Orthopaedics, Leadership, Mental Health, Gerontology, Immunization, IM/ID, Infusion Therapy, Chronic Diseases and Foot Care.

Approved Applicants by Funding Type



Grant Funds Approved & Distributed



*62% of funding approved was disbursed.



"With the increased knowledge from this course, my competencies have been enhanced and scope of practice as an LPN has expanded."

Darlene de Moissac, LPN
(CARE, Volume 22, 2nd Edition, Summer 2008)

"As professional nurses, we should always be striving to better our practice, and to become better informed about the area of nursing we have chosen to embrace."

Marie Boczkowski, LPN,
District 1 Council Member.
(CARE, Volume 22, 3rd Edition, Fall 2008)

We say jump through – both feet first. This is an important moment for our profession. It is time for us, as nurses, to reach for what we know is possible.

Executive Message
(CARE, Volume 22, 4th Edition, Winter 2008)

EDUCATION STANDARDS ADVISORY COMMITTEE

The College of Licensed Practical Nurses is responsible for approving all basic and specialty education programs for practical nurses offered in Alberta. The Education Standards Advisory Committee (ESAC) is a Standing Committee of the Council of the College of Licensed Practical Nurses of Alberta. The ESAC is responsible for establishing the Standards for Program Approval and for reviewing and monitoring basic and specialty practice programs to ensure compliance with these Standards.

The period of April 2008 – March 2009 has been an exciting and busy year for the Education Standards Approval Committee.

Having received a five-year approval for the diploma nursing program in 2007, Bow Valley College, Northern Lakes College and NorQuest College have turned their attention to program refinement and innovative strategies for program delivery.

Implementation of the PN Program at three new sites is progressing well. Red Deer College began offering a stand-alone program in September 2008. Lethbridge College and Portage College admitted their first students in September 2007 and will graduate their first cohort of students this fall.

Columbia College, a private institution located in Calgary, began offering a PN Program in April 2007. They have graduated two cohorts of students all of whom have been successful on the national registration examinations. This program was reviewed in January 2009 and received a three year approval.

The ESAC continues to work with two private Colleges who have indicated their desire to establish PN Program in Red Deer and Edmonton.

The specialty program in Perioperative Nursing for LPNs offered by MacEwan College was reviewed and approved in the spring of 2008. This program is normally offered through distance delivery.

However, health care agencies identified an urgent need for program graduates and the College responded by mounting a one-time face-to-face offering of the Program.

Over the past year, all of the PN Programs have increased their enrollments. This has placed additional pressure on the health care system to meet clinical placement demands. PN Programs are exploring creative alternatives such as the use of simulation laboratories to maximize the effective use of the limited clinical placements. A number of pilot projects have also been undertaken to evaluate different approaches to clinical placements. ESAC will continue to work with programs to identify alternatives that will address the capacity issues while ensuring sound practice experiences for students.

I would like to acknowledge the hard work of the members of ESAC and thank them for their input and commitment during 2008. Committee members include:

Pat Fox, LPN
Lynn Edwards, LPN
Sylvia Teare, Education Representative
Maureen McQueen, Education Representative
Bruce Finkel, Member at Large
Debbie Elliott, Employer Representative
Penny Kwasny, Employer Representative
Kate Chidester, Employer Representative
Teresa Bateman, CLPNA Representative
Linda Stanger, CLPNA Representative

The Committee also thanks CLPNA staff for providing efficient secretarial support.

Gloria Bauer
Chair, ESAC



“Being an LPN is about lifelong learning. What I love about my job is that every patient is different.”

Dave Dearden, LPN
(CARE, Volume 22, 3rd Edition, Fall 2008)

“We are aware the LPN role has changed and continues to... opening doors for role growth because they are so skills focused!” “Skills quickly earn respect and that was quickly apparent here with the LPNs we hired.”

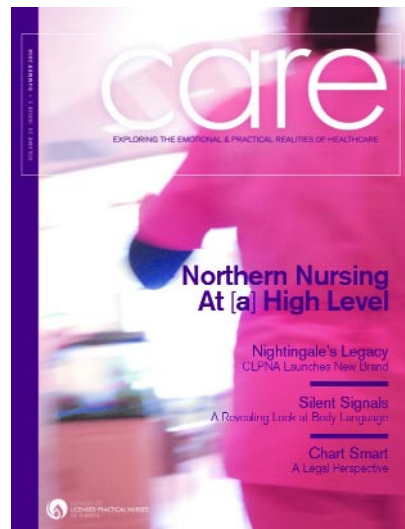
Kathy Howe, RN, Patient Care Manager,
Foothills Medical Centre
(CARE, Volume 22, 4th Edition, Winter 2008)

“I have learned a great deal and will carry it with me in my future endeavours.”

LPN on Continuing Education
(CARE, Volume 22, 2nd Edition, Summer 2008)

The last year marked a significant time in the area of communicating with members, employers, government, and stakeholders. From the Member Survey conducted in 2007, one of the things LPNs told us was that the profession is not well understood; and that we needed to better inform the public and others of the role of the LPNs. We heard and took action.

The first step in the process involved a rebranding initiative. The timing was perfect - a rapidly changing health care system, an evolving profession, and nurses feeling undervalued and underutilized while continuing to demonstrate a compassionate heart, a caring soul, and skillful application of nursing science. The outcome - a new logo featuring a stylized Florence Nightingale lantern, a new tag line, "*Competent, Committed Care*", and the statement, "*LPNs - Professional Nurses*" - was unveiled at the 2008 Spring Conference. Posters showcasing the new brand were distributed to over 900 LPN employers across Alberta in time to celebrate National Nurses' Week in May, along with a radio ad campaign that aired on eight stations.



CLPNA's quarterly magazine, News & Views, was repurposed, redesigned, and launched as CARE magazine, "Exploring the Emotional and Practical Realities of Healthcare". Changes were made to positively influence CLPNA's ability to achieve stated outcomes of Council, especially in the areas of advocacy and leadership, and to meet the goal that:

The CLPNA speaks on behalf of the profession,

interprets the regulation, defines the LPN scope of practice, promotes the profession, and advocates for the patient, for LPNs, and for a quality health care system.

The editorial scope of the magazine continues to broaden its appeal to the general healthcare audience, rather than solely focusing on LPN regulatory matters. As the planning document "CARE Magazine - Evolution" states:

CARE is a bridge-builder: an educator that unifies the health profession by promoting awareness and understanding of respective roles and value across the breadth of the health profession; an advocate and activist that influences health policy and direction; and a visible presence to the public as a strong voice of issues, success, and challenges inherent in the health profession.

CARE magazine (circulation 9000+) is distributed to LPNs, employers, government, and other key stakeholders throughout Alberta and Canada.

The College's website, www.clpna.com, lengthens the reach of the College to the rest of the world. To coordinate with the rebranding initiative, the site was updated and retooled. The homepage now features regularly updated announcements featuring current information about College projects and member news. Webpages of highest interest include job listings, registration information for internationally educated nurses and LPNs from out of province, CLPNA-provided resources, and the Public Registry. The CLPNA website receives approximately 9000 visits per month from 5000 unique visitors.

Unique websites were launched for the annual CLPNA Spring Conference (www.clpnaconference.com) and the Fredrickson-McGregor Education Foundation for LPNs (<http://foundation.clpna.com>).

ReguLink is a new periodic email newsletter created to meet the varied needs of managers and employers who work with LPNs. ReguLink shares information about the various services and mandates of

CLPNA, specifically focusing on a few items of key interest. Changes to LPN scope of practice, primers on LPN registration process, and updates to online resources have all been announced using ReguLink.

NURSEONE

CLPNA was one of the first LPN jurisdictions to trial NurseONE with our membership. NurseONE is a personalized interactive web-based resource providing nurses in Canada with access to current and reliable information to support their nursing practice, manage their careers, and connect with colleagues and health-care experts.

NurseONE was created by the Canadian Nurses Association to support nurses in all practice settings within the diverse communities across Canada. CLPNA completed the one year pilot in August of 2008 with 12.75% of the CLPNA membership signed onto NurseONE, which is one of the highest adoption rates in all nursing jurisdictions. CLPNA has decided to continue the service for another year.

SPRING CONFERENCE

Spring Conference 2008 provided an opportunity for 567 LPNs, Nursing Managers, Educators, and Students to meet in Edmonton at the Marriott River Cree Resort on April 10th and 11th, 2008.

The two day conference focused on the theme "Inspired Nursing – Working from Within" with topics such as body language, hope, spirit at work, the power of play, and energizing and balancing your life. Other sessions with more of a clinical approach were focused on duty to care, chronic disease management, dementia care, men in nursing, and collaborative nursing. CLPNA's new brand launch started the event on Thursday morning with the announcement of a marketing campaign summarizing the two days at the Annual General Meeting on Friday afternoon.

With records being broken in attendance, sponsorship, trade show participation, and student involvement, delegates left with refreshed knowledge and a renewed sense of vigor and inspiration.



It was great to hear new ideas, and be given the tools to inspire, motivate, and lead in the future.

The spirit of everyone was electrifying. Reminded me why I chose this profession.

I liked everything - mostly the presentations, speakers, and energy of our organization.

I loved the way we were encouraged to be proud of being an LPN!

REGULATION OF MEMBERS OF THE LPN PROFESSION

The College is mandated under the Health Professions Act. This legislation allows the College to shape our profession through self-regulation. Regulatory requirements for LPNs, as outlined in provincial legislation, are administered to ensure safe, competent and ethical care is provided by the Licensed Practical Nurse and to intervene when that does not occur.

REGISTRATION AND PRACTICE PERMIT RENEWAL

The Registration department of the CLPNA works in conjunction with all areas of the College. The CLPNA is mandated to protect the public through the registration of Licensed Practical Nurses. This objective is achieved by ensuring all registrants meet specific criteria as defined by the Licensed Practical Nurse Regulation.

Alberta's nearly 8000 Licensed Practical Nurses (LPNs) comprise the second largest group of professional nurses in Alberta and enjoy the broadest scope of practice of LPNs in Canada, currently performing an estimated 70-75% of the competencies of the registered nurse. The LPN practices in a variety of settings and contexts including, but not limited to Acute Care, Maternal Child, Pediatrics, Continuing Care, Mental Health, Public Health and Community Agencies. Wages for LPNs in Alberta are above the National average for the profession.

The LPN workforce is aging. Of the current membership, 19% is over the age of 55, and potentially retiring soon. Currently, there is a shortage of LPNs in Alberta and creative strategies are necessary to address the growing need. There is great opportunity for new Licensed Practical Nurses in Alberta.

The number of registrants as of December 31, 2008 increased by 8.2% from 2007, rising from 7264 to 7859. It is also notable that our membership average age is now 41.2, which is one of the lowest averages in nursing in Canada.

Public Registry

The College of Licensed Practical Nurses of Alberta (CLPNA) On-Line Public Registry continues to be a high traffic area on our website. Appearing in the public registry is the registrant's registration number, their name, expiry date, specialties and restrictions. The Registry continues to be a valuable tool for Employers who can validate employee registration at any time without having to contact CLPNA directly.

In Migration - Initial Registrations Processed From Other Jurisdictions

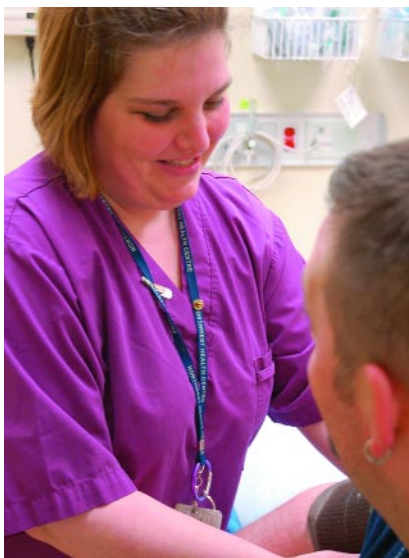
The number of applications for initial registration processed from out of province/USA applicants has increased from 247 in 2007 to 268 in 2008. The majority of LPN's applying to work in Alberta came from British Columbia, Ontario and the United States.

Out Migration - Registration Verification Requests From LPNs Applying In Other Jurisdictions

Registration verifications processed for LPNs applying to practice in other Canadian jurisdictions, the United States or any other country increased to from 206 in 2007 to 251 in 2008. Statistics reveal that 6% of requests were made from LPNs wanting to relocate to the Maritime Provinces; an 18% increase from 2007. Also notable, 57% of requests came from LPNs wanting to relocate to British Columbia and Saskatchewan; a 10% decrease from 2007. Verification of registration does not confirm that the member has, in fact, left the province.

CANADIAN PRACTICAL NURSE EXAMINATION & ASSESSMENT STRATEGIES INCORPORATED

Each province and territory is responsible for ensuring that graduates of practical nursing programs in Canada, and practical nurses educated in other countries, applying for registration as a practical nurse meet an acceptable level of competence before they begin to practise.



This level of competence is measured, in part, by the Canadian Practical Nurse Registration Examination (CPNRE) administered by the Provincial and Territorial Regulatory Authorities.

The CPNRE is prepared by and purchased from Assessment Strategies Inc. (ASI). The CPNRE is prepared by ASI working in collaboration with practical nurses, educators and employers of practical nurses from across Canada who serve as the content experts in developing and validating the CPNRE on behalf of the regulatory authorities. This ensures a common standard is met by practical nurses in those jurisdictions utilizing the national exam. CLPNA is an active participant in the development of the examination with representation on the Client Advisory Group, Examination Committee, Blueprint Committee, Competency Review Committee, and host of an annual Jurisdictional Review of draft exam questions. Currently a CLPNA representative chairs the Examination Committee.

The following table contains statistics as prepared by Assessment Strategies Incorporated.

Alberta CPNRE Candidates 2008

Number of Candidates	1st Exam	Repeat Exam	Total Candidates
Registered	406	55	461
Writing	405	54	459
Not Writing	1	1	2
Passing	370	34	404
Failing	35	20	55
% Passing	91%	63%	88%

Alberta graduates continue to score among top in the country.

The national exam is the final step in the registration process and is administered by the CLPNA three times each year in January, May and September.

“We are strengthening a health care system focused on the patient, and that means enabling front line health care providers like LPNs to deliver the right care at the right place at the right time.”

Charlotte Robb, Interim CEO,
Alberta Health Services
(CARE, Volume 22, 4th Edition, Winter 2008)

“Everyone working here considers everyone else an equal member of the team, patients simply get to know you as... a trusted nurse.”

Brian Latt, LPN
(CARE, Volume 22, 2nd Edition, Summer 2008)

“As a physician, I can say first-hand that LPNs are valued members of the health care team.”

Dr. Raj Sherman, MLA Edmonton -
Meadowlark and Parliamentary Assistant,
Health & Wellness.
(CARE, Volume 22, 2nd Edition, Summer 2008)

“We need to treat our clients in a holistic manner to be able to give them the best care.”

Eileen Farquharson, LPN
(CARE, Volume 22, 2nd Edition, Summer 2008)

“I challenge you to find for yourself what it is that makes your engine roar and pursue, persist and persevere until your passion over powers you.”

Hugh Pedersen, LPN, CLPNA President
(CARE, Volume 22, 3rd Edition, Fall 2008)

My experience was just so unbelievable and amazing. Instructors have been very warm, accommodating, friendly and nice. It made me feel that working in Edmonton will be great and non-traumatic, opposite to what I imagined."

Bridge Program Student



"I feel blessed and grateful to be given such a life altering opportunity. I find that my colleagues are extremely accommodating, helpful and kind. It's a pleasant experience to have such great co-workers. CLPNA is approachable and easy to deal with. Hence, they make it really easy for me to inquire about things that I am unsure of. Also, CLPNA requirements are comprehensible enough that it's easy to understand. Last but not the least, I found that nursing practice here are extremely functional. The scope of practice is different than the Philippine and I am learning new things everyday."

IEN

CLPNA believes this initiative has potential to significantly benefit the health care system within our province.

Executive Message
(N & V Volume 22, 1st Edition, Spring 2008)

INTERNATIONAL RECRUITMENT INITIATIVES

The Regulation of nursing practice through licensure ensures that nurses meet minimum standards for safe competent and ethical care. With projections of significant nursing workforce shortages by 2010, there is great impetus to enhance the numbers of nurses working in Alberta. CLPNA has partnered in a number of initiatives to ensure that Alberta is one step closer to a solution.

One significant approach is the active recruitment of internationally educated nurses (IENs). The CLPNA worked with employers, government, regulatory bodies and educational institutions exploring ways to expedite the assessment and registration processes for the IEN.

CLPNA participated with government and employers in collaborative recruitment missions to Great Britain, Nevada and Florida. The purpose of participation by CLPNA was to develop an understanding of the educational preparation, licensing and role of the Licensed Practical Nurse (or equivalent) in each of those jurisdictions with a goal of evaluating the potential as a recruitment source. We met with regulators, educators and nurses. Many nurses from the United States expressed interest in learning more about living and working in Alberta. CLPNA is currently seeing an increase in the numbers of LPNs coming to Alberta from the United States.

The key initiative in 2008 for CLPNA was the partnership with NorQuest College and Capital Health to facilitate a process involving the recruitment, assessment and licensure of internationally educated registered nurses (IENs) from the Philippines.

NorQuest College used a variety of strategies to assess the education preparation of Philippine IENs including articulation of the Philippine program using the NorQuest College Practical Nurse Diploma curriculum as the comparative. Further knowledge of the Philippine nurse education; theory, skills and workplace competencies was obtained by visiting a number of schools of nursing and hospitals, both private and government funded. This process revealed both strengths and weaknesses in Philippine competency-based curriculum related to knowledge and skill. The information gleaned from the articulation process provided the foundation for the development and implementation of the Canadian Practical Nurse Bridge.

In conjunction with the articulation, Capital Health and their designated recruitment company developed a process with a significant focus on the importance of pre-screening potential employees. During 2008, CLPNA registered 336 IENs from the Philippines with many more applications in progress. Out of those registered, 161 IEN LPNs wrote the Canadian Practical Nurse Registration Examination resulting in an 82% success rate on first time writing.

Challenging times require challenging strategies. While IEN recruitment is one important approach to resolution of the nursing shortage in Alberta it is the view of CLPNA that additional longer-term strategies including domestic recruitment into the profession and initiatives aimed at retention of our existing nursing workforce are critical to creating a healthy and vibrant workforce able to meet the needs of a growing Alberta.

Being a member of a profession has a distinct legal meaning and brings with it increased obligations to practice ethically, morally and competently. If an LPN has a complaint made against them, the LPNs conduct or competence has come into question. A complaint could come either from a patient, family members of patients, a co-worker, employer, letter of termination from LPNs last employer, or from a complaint made through the Protection for Persons in Care Act. The Health Professions Act provides the College with “quasi-judicial” powers to investigate instances of alleged unprofessional conduct by its members in order to protect the public.

Various committees and individuals are appointed by Council to carry out this mandate. The Complaints Director oversees administration of the conduct process. The Complaints Review Committee (CRC) reviews and ratifies Alternative Complaint Resolution (ACR) settlements, and conducts reviews of decisions by the Complaints Director to dismiss complaints concerning alleged unprofessional conduct. The Hearing Tribunal has quasi-judicial powers to conduct disciplinary Hearings. Appeals of Hearing Tribunal Decisions are reviewed by the Council Appeals Committee, which is comprised of CLPNA’s Council President and two other Council members. In addition to the appointed members, Alberta Health & Wellness provides public representation selected from a pool of participants who must comprise 25% of the committee for Hearing Tribunal and Complaints Review Committee.

In 2008, the College received 19 complaints, the Hearing Tribunal completed six Hearings, and the Complaint Review Committee completed two Reviews of Dismissal of Complaint. The Complaints Director resolved eleven complaints through the consent of the complainant and the investigated member. One investigated member surrendered their LPN registration in lieu of completing the disciplinary process.

COUNCIL APPEALS COMMITTEE

Until August 31, 2008:
Ruth Wold, LPN, Chair
Denise Simard-Zawacki, LPN
Peter Bidlock, Public Member

Starting September 1, 2008:
Hugh Pedersen, LPN, Chair
Kristen Shardlow, LPN
Robert Mitchell, Public Member

HEARING TRIBUNAL

Sheila Green, LPN, Chair
Dorothy Wurst-Thurn, LPN
Brenda Blom, LPN
Dawn Gillich, LPN
Deborah Reed, LPN
Kathryn Kennedy, LPN
Larry Leduc, LPN
Tobi French, LPN

COMPLAINT REVIEW COMMITTEE

Anne Lanz, LPN, Chair
Michelle Tavenier, LPN
Susan Blatz, LPN
Nadine Lafreniere, LPN
Barry Nesterchuk, LPN
Teresa Stacy, LPN

Historical Comparison

	2006	2007	2008
Cases Carried Over From Previous Year	14	21	20
Complaints Received in 2008	30	20	19
Total Complaints in Process in 2008	44	41	39

2008 Complaint Statistics

Complaints in Investigation stage	13
Complaints Pending Hearing	2
Hearings Completed	6
CAC Appeal Hearings Completed	0
CRC Review of Dismissal of Complaint	2
ACR Decisions Ratified	0
ACR's in Progress	0
Complaints Dismissed	1
Consent Resolution	11
Surrendered Registrations	1
Member Location Unknown - File Suspended	3
Member Deceased – File Closed	0
Total Complaints for 2008	39

2008 Origin of Complaints

Employer	17
CLPNA	0
Public	2
Protection for Persons in Care	0
Total Complaints Received:	19

2008 Hearings

Case	Decision
03.10.08	Orders: Continued suspension of practice permit until completion of orders from previous Hearing Tribunal Decision. Successful completion of a drug treatment program. Successful completion of several drug testings.
05.12.08	Orders: Reprimand, written report, and successful completion of self-assessment.
05.13.08	Orders: Caution, written report, and successful completion of a medication administration course.
11.14.08	Orders: Reprimand, fine, conditions on practice permit until successful completion of orders, successful completion of supervised practice, successful completion of random drug tests, and regular meetings with CLPNA practice consultant.
12.12.08	Orders: Caution, and successful completion of Pharmacology Refresher and Documentation Refresher courses.
12.18.08	Orders: Reprimand, successful completion of medication administration course, and written report.

membership

statistics

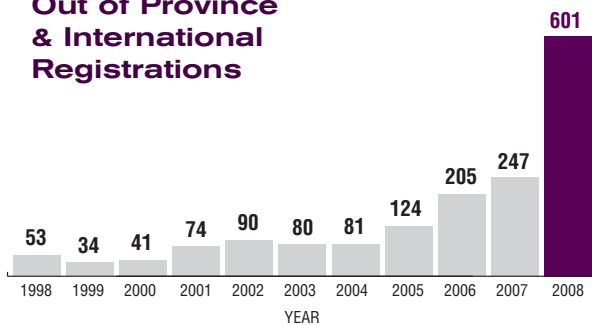
CLPNA Registration Data

Year ending December 31, 2008

Registrations

	2007	2008
Alberta Initial Graduates	536	487
Re-Entry LPNs	14	13
Other Canadian Registrants	225	238
Non Canadian Registrants	22	363
Renewals	6467	6758
TOTAL	7264	7859

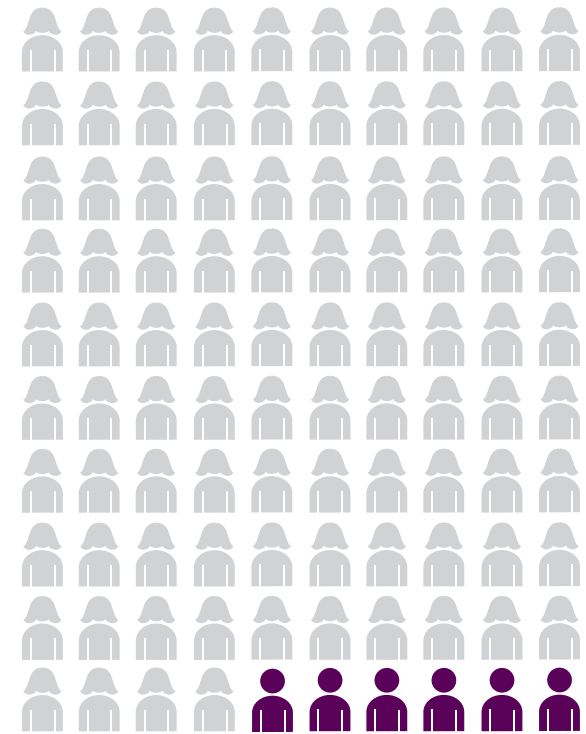
Out of Province & International Registrations



LPN Gender Distribution

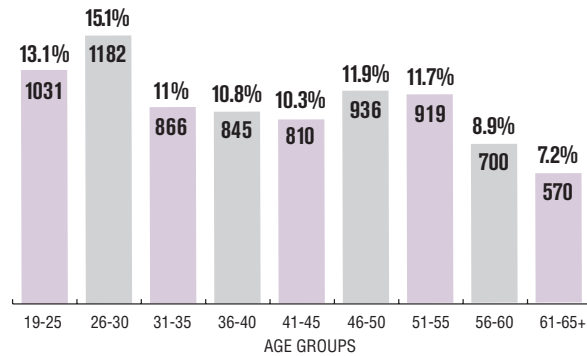


[+1.3% vs 2007]



Age of Active LPNs

Average Age: 2006 - 42.4
 2007 - 42.2
 2008 - 41.2

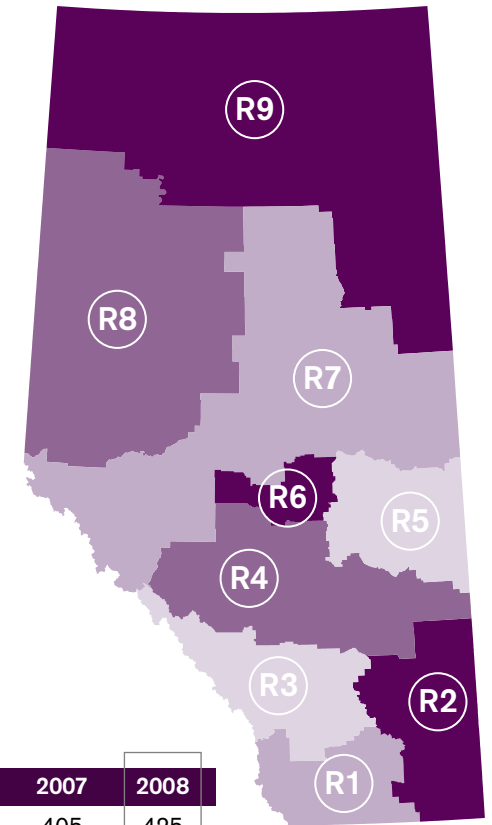


LPN Registration Trends

Year	Number of LPNs	Percentage of Loss/Increase
1986	8646	
1987	7894	-8.7%
1988	7225	-8.5%
1989	6956	-3.7%
1990	6736	-3.2%
1991	6651	-1.3%
1992	6545	-1.6%
1993	6378	-2.6%
1994	6196	-2.9%
1995	5562	-10%
1996	4963	-10.8%
1997	4723	-4.8%
1998	4606	-2.5%
1999	4342	-5.7%
2000	4431	2.0%
2001	4848	9.4%
2002	5172	6.7%
2003	5575	7.8%
2004	6037	8.3%
2005	6533	8.2%
2006	6864	5.0%
2007	7264	5.8%
2008	7859	8.1%

Distribution of LPNs by Health Region

	2007	2008
R1 Chinook Regional Health Authority	405	425
R2 Palliser Health Region	285	294
R3 Calgary Health Region	1685	1808
R4 David Thompson Regional Health Authority	843	838
R5 East Central Health	377	380
R6 Capital Health	2399	2784
R7 Aspen Regional Health Authority	414	419
R8 Peace Country Health	374	374
R9 Northern Lights Health Region	127	131
Other Canadian	405	406
TOTAL	7264	7859



PROVINCIAL HIGHLIGHTS

CLPNA is involved in a number of collaborative initiatives provincially, including the Federation of Regulated Health Professions of Alberta, Nursing Advisory Council of Alberta, a number of Health Human Resource planning initiatives by Alberta Health and Wellness and Alberta Employment and Immigration. The College participates on the advisory committee of the Practical Nurse Education Programs throughout the province and is also a member of the advisory committee for key research initiatives.

■ RESEARCH

The Alberta Nursing Knowledge and Education Project (KEP)

CLPNA is an active participant on the steering committee of this research project funded by Alberta Health and Wellness. The goal of the project is to define the knowledge common across the three nursing professions, describe the levels of knowledge that differentiates them, and produce a replicable model that could be used in future for similar cross profession analysis. The purpose of the research is to provide information which will contribute to effective health human resource planning and utilization. The Knowledge and Education Research Project was initiated by the Nursing Advisory Council of Alberta. Results are expected in 2009.

■ RESEARCH

Enhancing Nursing Role Effectiveness through Job Redesign

This research project funded by the Alberta Heritage Foundation for Medical Research and the Calgary Health Region is intended to assist nursing providers to optimize their roles by effectively utilizing their knowledge and skills in the provision of patient care. CLPNA participates as a member of the Advisory Committee. Optimizing the roles of nurses through job redesign is aimed at facilitating the use of the most appropriate staffing models for high quality service delivery through interprofessional health teams

across various health care settings. The principal investigator for this project is Debbie White, RN PhD, Calgary Health Region, University of Calgary.

The CLPNA in collaboration with the College and Association of Registered Nurses of Alberta (CARNA) was involved in the integration of LPNs onto a unit where a role did not previously exist. The study concluded late 2008. The final report is expected early 2009.

CANADIAN COUNCIL FOR PRACTICAL NURSE REGULATORS (CCPNR)

The CCPNR is a federation of provincial and territorial members identified in legislation as responsible for the safety of the public through the regulation of Licensed Registered Practical Nurses. The organization promotes excellence in leadership, best practice, innovation and professional development.

The focus of the work during 2008 largely related to labour mobility initiatives resulting from the Agreement on Internal Trade (AIT). In addition, the Council established a national practice consultants group, initiated a joint meeting for the Executive Directors of the three regulated nursing groups, and initiated development of National Peri-Operative Standards and a National Code of Ethics for the profession.

The opportunity to work with our colleagues in other jurisdictions and to serve on national advisory committees and projects is an important part of the work we do. Sharing best practices and a commitment to the common goal of excellence in practical nurse regulation contributes to an important national presence for the Licensed Practical Nurse.



But we can look through the window to a day where well trained LPNs in Alberta and across Canada are integral to the performance of the health system, and are fully respected and valued by health care professionals and the public.

(CARE, Volume 22, 2nd Edition, Summer 2008)

“The Alberta health system has many rewarding opportunities for LPNs with this type of expertise and the options are growing all the time.”

Marianne Stewart, Capital Health's Vice President and Chief Operating Officer for Primary Care.

(CARE, Volume 22, 4th Edition, Winter 2008)

Let's work together to make change. This is a time for innovation and the time to challenge the status quo.

Executive Message

(CARE, Volume 22, 4th Edition, Winter 2008)

“We work hard to create opportunities for LPNs to acquire new skill sets because more skill equals new places to be.”

Kathy Howe, RN, Patient Care Manager, Foothills Medical Centre

(CARE, Volume 22, 4th Edition, Winter 2008)

FINANCIAL HIGHLIGHTS


COLLEGE OF LICENSED PRACTICAL NURSES OF ALBERTA

The complete audited financial statements are available by contacting CLPNA at 780.484.8886.

STATEMENT OF FINANCIAL POSITION

As at December 31, 2008	2008	2007
ASSETS		
CURRENT		
Cash	\$ 493,840	\$ 166,717
Short-term investments	2,392,998	2,463,670
Accounts receivable	52,450	13,943
Inventory of supplies	5,660	9,721
Prepaid expenses	105,815	54,270
	3,050,763	2,708,321
INVESTMENTS		
CAPITAL ASSETS	2,682,904	3,041,476
	674,916	52,112
	\$ 6,408,583	\$ 5,801,909
LIABILITIES		
CURRENT		
Accounts payable and accrued liabilities	\$ 179,791	\$ 185,458
Prepaid registration fees	1,966,135	1,645,075
Deferred grant revenue	71,330	-
	2,217,256	1,830,533
LEASE INDUCEMENT		
	220,552	-
	2,437,808	1,830,533
NET ASSETS		
Unrestricted	561,641	914,537
Restricted net assets		
Endowment Fund	2,635,321	3,000,000
Capital Fund	674,916	52,112
Operating Room Nursing Specialty Education Fund	98,897	-
Alberta Provider Directory Fund	-	4,727
	3,970,775	3,971,376
	\$ 6,408,583	\$ 5,801,909

Approved by the Council:


 _____ Council member


 _____ Council member

STATEMENT OF OPERATIONS - GENERAL FUND AND CAPITAL FUND

For the Year Ended December 31, 2008	2008	2007
REVENUES		
Registration Fees		
Active	\$ 1,852,250	\$ 1,784,140
Out of province assessment	92,060	30,780
Initial	22,105	19,525
Late	18,905	24,420
Reinstatement	14,700	840
Fines	10,225	-
Associate	8,100	6,800
License verification	5,456	3,802
Document fees	2,149	-
Annual general meeting	168,106	87,924
National examinations	125,856	139,553
Grant revenue	98,354	-
Interest income	69,157	84,028
Program fees	37,590	9,185
Advertising	30,942	10,912
Continuing competency profile	30,834	30,727
Miscellaneous	5,554	16,838
	2,592,343	2,249,474
EXPENSES		
Administration		
Rent and occupancy costs	191,521	110,305
Office and computer	106,735	63,528
Professional fees	49,155	43,115
Amortization of capital assets	39,797	11,098
Bank charges and interest	38,277	32,724
Postage	32,684	42,738
Promotion and travel	27,229	-
Loss on disposition of capital assets	22,142	3,540
Consulting fees	20,346	60,827
Telephone and utilities	19,703	14,251
Printing	14,934	7,963
	562,523	390,089
Personnel costs	903,968	727,171
Cost of services	855,944	845,144
	2,322,435	1,962,404
EXCESS OF REVENUES OVER EXPENSES FOR THE YEAR	\$ 269,908	\$ 287,070

STATEMENT OF CHANGES IN NET ASSETS

For the Year Ended December 31, 2008

	Unrestricted	Capital Fund	Alberta Provider Directory	Operating Room Nursing Specialty	Endowment Fund	2008	2007
Balance, beginning of year	914,537	52,112	4,727	-	3,000,000	3,971,376	3,680,603
Excess (deficiency) of revenues over expenses	331,847	(61,939)	(4,727)	98,897	(364,679)	(601)	290,773
Investment in capital assets	(684,743)	684,743	-	-	-	-	-
Balance, end of year	561,641	674,916	-	98,897	2,635,321	3,970,775	3,971,376

STATEMENT OF OPERATIONS - ENDOWMENT FUND

For the Year Ended December 31, 2008

	2008	2007
REVENUES		
Investment income	\$ 104,930	\$ 37,950
Contribution from Fredrickson McGregor Education Foundation	12,194	-
Gain (loss) on disposal of long-term portfolio investments	(142,981)	12,993
Unrealized gain (loss) on held-for-trading portfolio investments	(319,531)	12,194
	(345,388)	63,137
EXPENSES		
Brokerage fees	19,291	21,661
Donation to Fredrickson McGregor Education Foundation	-	41,476
	19,291	63,137
DEFICIENCY OF REVENUES OVER EXPENSES FOR THE YEAR	\$ (364,679)	\$ -

2008 Re-Brand

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