



COLLEGE OF  
**LICENSED PRACTICAL NURSES**  
OF ALBERTA



# 2021 ANNUAL REPORT

competent committed care

# MISSION:

To regulate in a manner that promotes excellence, so that Albertans have confidence in the care they receive from Licensed Practical Nurses (LPNs) throughout their personal healthcare journey.

## What we do:

- Set education, registration, and annual renewal requirements
- Set and enforce practice, conduct, and ethical standards for delivery of professional services
- Comply with Alberta's healthcare legislation and regulation
- Set continuing competence requirements
- Investigate concerns regarding questionable conduct of a registrant
- Maintain an Alberta public database of registrants who are licensed to practice in the profession
- Provide regulatory focused information and education about the practice of the profession, expected professional standards, and guidelines that support public safety

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## Message from the COUNCIL PRESIDENT



The College of Licensed Practical Nurses of Alberta (CLPNA) regulates the Licensed Practical Nursing (LPN) profession in Alberta by setting and maintaining standards for registration, practice, and conduct for practical nurses. The CLPNA Council is the governing body for the CLPNA and sets the strategic direction through a Policy Governance framework. This is such important work and I am honoured to contribute in my new role as the CLPNA Council President.

The Council underwent significant change in 2021. On April 1, 2021, the CLPNA Council changed the composition of Council membership in response to Bill 30 of the *Health Statutes Amendment Act* passed in July 2020. The Act requires all health professional regulatory colleges in Alberta to increase public member representation from 25 percent to 50 percent of the total council membership. Public members are selected and appointed by the provincial government.

The Council also passed a motion to discontinue district elections and move to a competency-based appointment process. Under the updated bylaws, regulated members on the Council represent the province of Alberta as a whole, instead of only their region. The CLPNA Council is now composed of six regulated members and five public members, with the sixth still to be appointed. The composition and appointment changes create a more transparent, representative Council to lead the CLPNA.

Preparatory work for bylaw amendments to comply with Bill 46 was undertaken in 2021 as well. We are expecting 2022 to be a busy year for Council as we make significant bylaw changes to comply with professional regulation amendments and the transition of Health Care Aides to professional regulation.

In September 2021, myself, Ashley Cesar (stepping into the Vice President role), Chloe Kilkenny, and David Haastrup began our new roles on the CLPNA Council. We were welcomed by the experienced, diverse team of regulated and public members and look forward to working together. The CLPNA Council also said goodbye to former President Valerie Paice. In her nine years on Council, with five as president, Valerie made a significant impact at the CLPNA and in LPN regulation. The CLPNA and Council are grateful for her years of leadership and passionate service to the CLPNA.

I'd like to thank the public members who have extended their terms to accommodate many of these significant changes that took place in 2021, as well as extending our welcome to new public members. Their diverse perspectives and contributions are critical in establishing a Council that looks to the future.

The COVID-19 pandemic continued to impact the public and healthcare providers provincially, nationally, and globally, and we are so grateful to our registrants for their continued dedication to safety in this ever-changing environment. Council meetings and the AGM were both held virtually again in 2021 to ensure safety.

I am honoured to serve in this role alongside dedicated LPNs and public Council members. My personal passion is working to empower LPNs to consistently strive to be the best they can be in their practice to provide quality, safe, ethical care and I'm looking forward to continuing to work towards this in 2022. To the over 18,000 LPNs caring for Albertans each day, I extend a heartfelt thank you for all that you do.

Sincerely,  
Kurtis Kooiker, President

## Message from the PUBLIC MEMBERS

As the public representatives on the CLPNA's Council, we are committed to transparency in the regulation of LPNs in Alberta. Our role is to act on behalf of Albertans to support the CLPNA to regulate the LPN profession with excellence and have public protection at the centre of every decision.

In 2021, we saw the transformation in the composition of the CLPNA's Council, moving away from elections to competency-based appointments of professional members, and increasing public members to make up 50 percent of the Council. We strongly support the increased regulation as this builds greater accountability, transparency, and representation into regulation.

The move to a competency-based appointment also creates a well-rounded Council. The Council approved a Competency Matrix to outline core competencies and skill sets; these key skills and abilities will enhance the functioning of the Council so that it can perform its legislated mandate. We are excited by and committed to these changes as they increase regulatory openness and reinforce the CLPNA's ongoing commitment to public protection.

In 2020, changes to the *Health Statutes Amendment Act* resulted in a significant area of legislative change. Bill 30 required all health professional regulatory colleges in Alberta to increase public member representation on their Councils, Hearing Tribunals, and Complaint Review Committees. In 2021, the CLPNA fulfilled this legislative change and welcomed the shift.

Sincerely,  
John Chapman, Austin Mardon, Linda Osinchuk,  
Crystal Phillips, Lisa Stebbins  
Public Members

# CLPNA COUNCIL 2021



KURTIS KOOIKER, LPN,  
President,  
Regulated Member



ASHLEY CESAR, LPN,  
Vice President,  
Regulated Member



CHLOE KILKENNY, LPN,  
Regulated Member



JENNIFER PEACE, LPN,  
Regulated Member



TIFFANY SMITH, LPN,  
Regulated Member



DAVID HAASTRUP, LPN,  
Regulated Member



JOHN CHAPMAN,  
Public Member



AUSTIN MARDON,  
Public Member



LINDA OSINCHUK,  
Public Member



CRYSTAL PHILLIPS,  
Public Member



LISA STEBBINS,  
Public Member



Public Member,  
to be appointed

*Shows active Council members in December 2021*

# CLPNA 2021 YEAR IN NUMBERS

1245

Alberta graduate  
registrations  
2020 - 806

602

Out of Province  
registrations  
2020 - 401

69

IEN\* registrations  
2020 - 75

18750

total LPN registrations

6.2%

growth in  
registration

173

complaints  
received

13

hearings  
completed

38

average age  
of LPNs

\*Internationally educated nurse



# 90%

of Alberta  
candidates passed  
CPNRE Exam  
on first writing

## Top Places of Employment



Hospital

# 36%

6163



Continuing Care\*

# 28%

4862



Community Care\*\*

# 15%

2671

## Employment

# 43%

Full-time

7896

# 34%

Part-time

6126

# 23%

Casual

4124

## Practice Consultations

# 2343

inquiry responses

Learning Modules  
Completed

# 20562

39 Webinars

# 6644

attendees

Self-study Courses  
Completed

# 19018

\*Continuing Care includes Nursing Home / Long Term Care, and Rehabilitation / Convalescent Centre.

\*\*Community Care includes Community Health / Health Centre, Home Care Agency, and Physician's Office / Family Practice Unit.

# GOVERNANCE



## Licensed Practical Nurses (LPNs) are health professionals regulated by Alberta's *Health Professions Act* (HPA).

The HPA authorizes the College of Licensed Practical Nurses of Alberta (CLPNA) to regulate the profession. The Council of the CLPNA is responsible for the governance of the CLPNA and the oversight of the CLPNA's management. Under the bylaws of the CLPNA, and consistent with the HPA, Council is to be composed of six regulated members and six public members. This new composition includes an increase in public member representation. However, for most of 2021 there was a vacancy of one of the public Council members. In addition to the HPA, a central piece of legislation guiding Council and the operations of the CLPNA is the *Licensed Practical Nurses Profession Regulation*. Council also makes more specific bylaws, standards of practice, and codes of ethics to regulate the profession of licensed practical nursing in Alberta.

## Health Professions Act Amendments

### Bill 46 and its effects

On December 9, 2020, the *Health Statutes Amendment Act* received royal assent. Bill 46 made substantial amendments to the *Health Professions Act*, although many of those amendments did not come into force in 2021, with many not likely to come into force until 2023 or later.

The principal aims of Bill 46 for the CLPNA include the following:

- Separating regulatory and professional association roles of health colleges
- Regulating Health Care Aides (HCAs) as a regulated health profession
- Moving regulation-making power for matters such as professional liability insurance, evidence of good character, and continuing competence programs and assessments from each profession's professional regulation to other instruments

## Divestment of non-regulatory functions

The separation of the regulatory and professional association roles of health colleges must occur by April 1, 2023. While the CLPNA did not function as a professional association for LPNs, the passing of Bill 46 has accelerated the CLPNA's strategic plan to focus on its core regulatory functions. The CLPNA has been engaged in the necessary work to enable this strategic focus, including reviews of its professional regulation, bylaws, standards of practice, program approvals, and operational policies. The CLPNA has also adjusted our organizational structure to support an increased regulatory focus and prepare for growth with the upcoming regulation of the HCA profession.

## Health Care Aide regulation

As the college that will be responsible for regulating Health Care Aides, as a profession distinct from LPNs, the CLPNA started preparatory work for a transition to regulation that will result in, at least, an additional 30,000 regulated health professionals in Alberta. Preparatory work began in 2021, including discussions on scope of practice, professional standards, professional ethics, entry-to-practice education standards, and continuing competence for HCAs. The regulation of HCAs in Alberta will be groundbreaking, as no other jurisdiction in Canada regulates HCAs as a distinct health profession.

## Licensed Practical Nurses Profession Regulation

### Anticipated new LPN Regulation

As authorizations to perform restricted activities, professional liability insurance, and continuing competence programs are being removed from each profession's professional regulation to other instruments, the CLPNA has started preparatory work for a new *Licensed Practical Nurses Profession Regulation*, to comply with Bill 46 requirements and align with national standards.

## CLPNA Bylaw Revisions

### Bill 30 and Bylaw Updates

Council amended the CLPNA's general bylaw in 2021 to comply with the *Health Statutes Amendment Act* as well as other governance modernizations including:

- Changing the composition of its Council with public members increasing from three to six (of 12)
- Changing the composition of the CLPNA's quasi-judicial committees so that public members make up a minimum of half the members
- Setting a minimum period of Council experience to be eligible to be elected as a Council officer
- Abolition of the direct election of regulated members of Council (CLPNA registrants) by district
- Developing a competency matrix and appointment process for Council appointments and elections
- Reorganization and redefinition of the positions of Registrar and Deputy Registrar

### Committee Terms of Reference

Council approved updated Terms of Reference for the hearing tribunal and most CLPNA committees, ensuring that terms are consistent with the requirements of Bill 30.

### Bill 46

Preparatory work for bylaw amendments to comply with Bill 46, as well as other modernizations, were undertaken in 2021. The CLPNA will continue to revisit and refine bylaws as required to best align with the organizational and legislative changes.

## Standards of Practice and Codes of Ethics

### 2020 CCPNR Standard

The Canadian Council for Practical Nurse Regulators (CCPNR) is a federation of provincial and territorial members who are responsible for the safety of the public through the regulation of LPNs. In 2013, the CCPNR issued the *Standards of Practice for Licensed Practical Nurses in Canada* as a model for a common standard of practice for LPNs in Canada. This model was reviewed in 2020 and an updated version was issued by the CCPNR in 2021: the *2020 Standards of Practice for Licensed Practical Nurses in Canada* (2020 CCPNR Standard). On March 12, 2021, Council authorized sending the 2020 CCPNR Standard to the Minister for review and comment. The consultation is anticipated to be received in early 2022.

### Perioperative Standard

The CLPNA's *Standards of Practice for Licensed Practical Nurses on Restricted Activities and Advanced Practice* (Restricted Activities Standard) includes a reference to the CCPNR's *Standards of Practice and Competencies for Perioperative Licensed Practical Nurses* (CCPNR Perioperative Standard). The CCPNR has recently withdrawn the CCPNR Perioperative Standard, which was published in 2010, for lack of currency. For LPNs in Alberta, current and more detailed requirements, and national applicability for perioperative care have already been incorporated in the competency profile. Consequently, amendments to the Standards of Practice on Restricted Activities and Advanced Practice were developed to remove references to the withdrawn CCPNR Perioperative Standard to minimize the risk of confusion for registrants. It is anticipated that Council will consider final adoption of these changes later this year.

## Formal Consultations with Alberta Health and other Regulatory Authorities

As a health profession regulator, the CLPNA shares a responsibility to participate in regulatory consultation with Alberta Health and others. The CLPNA took part in reviewing the following documents in 2021:

- College of Alberta Denturists
  - Revised Standards of Practice and Code of Ethics
- Alberta College of Optometrists
  - Proposed change to Optometrist Profession Regulation to expand the profession's scope of practice to include laser therapy
- Alberta College of Paramedics
  - Paramedics Dispensing Standards
- Alberta College of Pharmacy
  - Filling Prescriptions for Animal Health Standards
- College of Physicians & Surgeons of Alberta
  - Medical Cannabis Standards
  - Telemedicine Standards (including follow-up consultations)
  - Continuity of Care Standards (including follow-up consultations)
  - Episodic Care Standards (including follow-up consultations)
- Physiotherapy Alberta College + Association
  - Restricted Activities Standards
- Association of Counselling Therapy of Alberta
  - Draft regulation to continue the association as the College of Counselling Therapy of Alberta under the *Health Professions Act*
  - Draft Standards of Practice and Code of Ethics for Counselling Therapists, Addiction Counsellors, and Child and Youth Care Counsellors
- Government of Nunavut
  - Discussion Paper on the Review of the *Nunavut Nursing Act*

## Mobility of Health Professionals

Alberta health profession regulators have obligations under the Canadian Free Trade Agreement (CFTA), the New West Partnership Trade Agreement, and, shortly, the *Labour Mobility Act* to facilitate the mobility of health professionals in Canada. The CLPNA has been reviewing its regulations, bylaws, and operational policies to ensure compliance with the *Fair Registration Practices Act*, the *Labour Mobility Act*, and Alberta's labour mobility obligations under internal trade agreements. This includes reviewing the CLPNA's current legitimate objectives - restrictions on the labour mobility of a health professional from another provision by restricting their practice when initially registered until competence can be demonstrated, under the CFTA.

## Inter-regulator Committees

The CLPNA contributes to the deliberations of a variety of regulator committees, both between regulators of different professions in Alberta, as well as between regulators of peer professions in other jurisdictions. These committees include the Alberta Federation of Regulated Health Professions, the Canadian Council of Practical Nurse Regulators, and the Canadian Nurse Regulators Collaborative.

Message from the

## REGISTRAR/CHIEF EXECUTIVE OFFICER



Challenge, resiliency, and strength are three words that come to mind as I reflect on 2021. The year brought new realities that required us to be reflective and innovative, while remaining a strong support for the health system and public we serve. Throughout the pandemic, we have witnessed endless devotion, courage, and responsiveness of all healthcare workers, caregivers, and essential workers. I extend a heartfelt thank you to Licensed Practical Nurses (LPNs), Health Care Aides (HCAs), and all healthcare providers across the province for your dedication and commitment to providing safe and compassionate care to Albertans during these difficult times.

This year, the CLPNA finalized the *2022-2025 Strategic Plan* to set the stage for upcoming changes. New Alberta legislation accelerated existing CLPNA plans to increase its focus on regulatory activities, with much of this work already underway. We continue to plan for the future regulation of Health Care Aides and are looking forward to welcoming HCAs when proclaimed. Central to our work is a commitment towards diversity, equity, and inclusion (DEI). We are taking deliberate and sustained action by creating a multi-year DEI roadmap that aligns to our goals with clear measures of success.

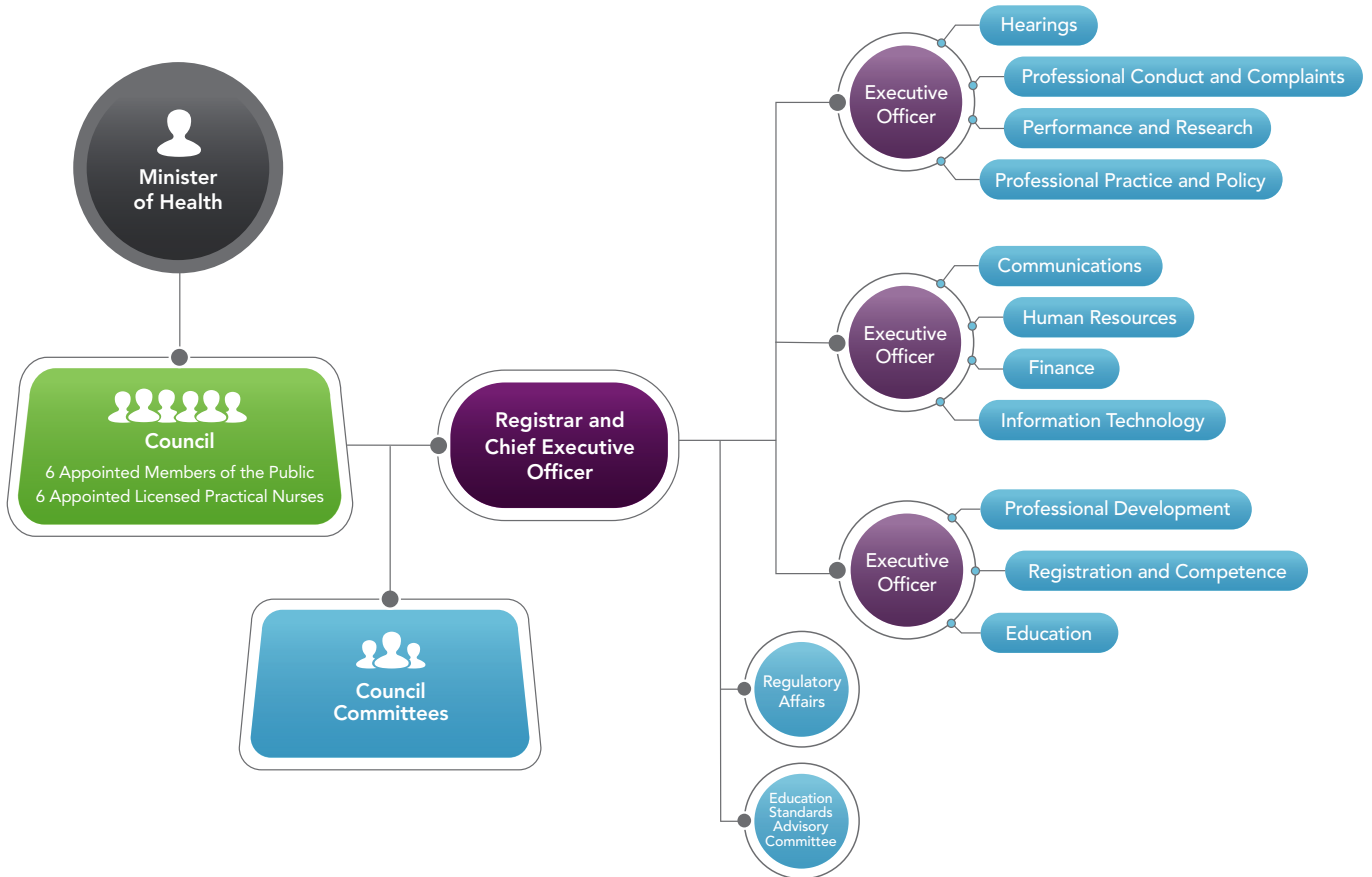
During 2021, we updated policies and practices to support labour mobility and worked with multiple stakeholders to support the health workforce. CLPNA approved a fee reduction for Courtesy Registration Applicants with an expedited process for approvals where registration could be sought within a couple of business days. We implemented a non-regulated student membership to provide a channel to share regulatory information with students throughout their practical nurse program. We saw the first cohort of LPN Refresher Students in September 2021, with expected graduates in the first quarter of 2022. The Canadian Practical Nurse Registration Exam was moved online to support exam access during the pandemic and this will be kept in place given its successful implementation and positive feedback.

In the spring of 2021, CLPNA launched a new organizational structure to support future-forward growth, while enhancing team function and synergies. CLPNA has adapted well to a primarily remote-work environment while maintaining our operations and commitment to public protection. We are future-focused on changes in our working environment, providing further flexibility in the workplace to meet the needs of our stakeholders.

Throughout the pandemic, CLPNA consistently pulled together as a team, rising to the changes, challenges, and demands presented. As we look forward into 2022, we will continue to grow, be innovative, and remain responsive to best meet the needs of the system and the public interest we serve.

Sincerely,  
Jeanne Weis, Registrar and Chief Executive Officer

# CLPNA ORGANIZATIONAL STRUCTURE





# REGISTRATION & EDUCATION





# REGISTRATION

The CLPNA is committed to a clear, fair, and consistent registration process. Our registration department leads this work by ensuring those entering practice as an LPN in Alberta meet the requirements expected of the practical nurse in this province and by managing the LPN renewal process, continually maintaining standards for registration in Alberta.

In March of 2021, the CLPNA implemented a non-regulated student membership category. This non-regulated membership was developed to allow the CLPNA to connect with students throughout their practical nurse program and provides an opportunity to share regulatory information to students prior to registration, proving to be an important digital touchpoint throughout the pandemic.

The CLPNA continues to work with Touchstone Institute in the development of an Objective Structured Clinical Examination (OSCE) to be used as a tool in the overall assessment process for registration. The OSCE will allow for an alternate assessment to be used to determine clinical competence in practical nursing.

As the pandemic extended into 2021, the registration process was continuously reviewed to find ways to streamline it for LPNs. Some of these initiatives included developing a more efficient approach to Courtesy Registration, including working with organizations like Alberta Health Services, the Red Cross, and many travel nursing agencies, to ensure an expedited registration process.

In September 2021, Lethbridge College admitted its first cohort of students into the LPN refresher program. The Registration department worked with the program to ensure a seamless approach to program referrals from former Alberta LPNs. Graduates from this program are expected during the first quarter of 2022. Medicine Hat College has also been approved to offer an LPN refresher program, starting in September 2022.

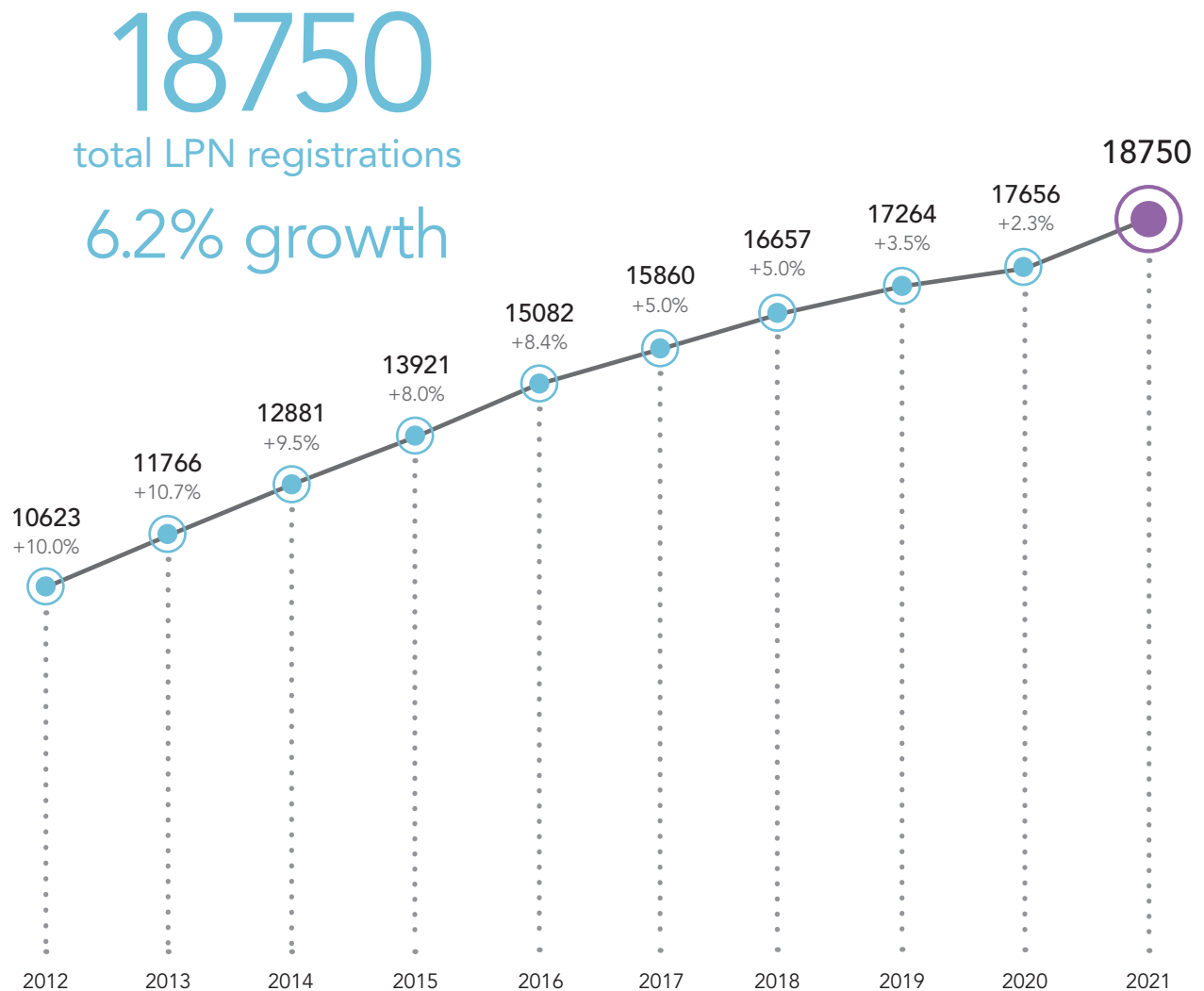
There was a registration review held over from 2020 which was resolved in the first quarter of 2021. Through the review process, it was determined that registration could be accommodated through a condition on a practice permit. There were no other reviews in 2021.

Alberta Canadian Practical Nurse Registration Examination Candidates 2021\*

Alberta Candidates	1st Exam	Repeat Exam	International Applicants 1st Exam	International Repeat Exam	Total Candidates
Registered	1463	154	71	14	1702
Writing	1320	143	63	13	1539
Not Writing	143	11	8	1	163
Passing	1190	108	53	11	1362
Failing	130	35	10	2	177
% Passing	90%	76%	84%	85%	88%

\* Statistics prepared by Yardstick Assessment Strategies.

## BY THE NUMBERS REGISTRANTS



## Registrations

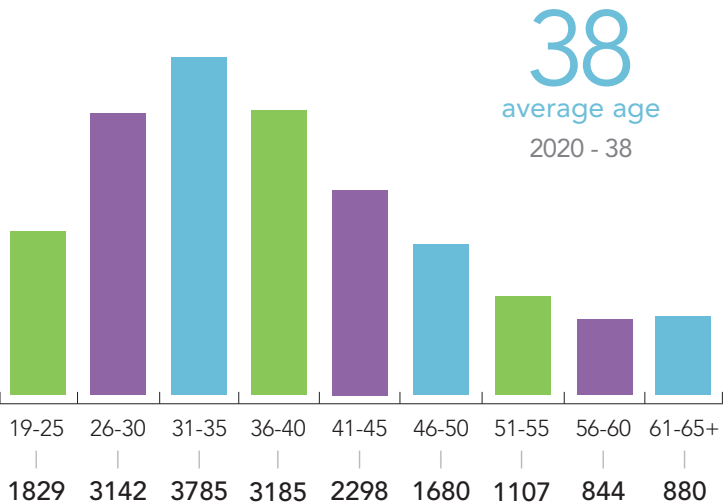
	2020	2021
Alberta Graduates NEW Members	806	1245
Canadian Out of Province NEW Members	401	602
International NEW Members	75	69
BScN Members	1	2
Reinstatements*	319	328
Re-Entry	0	0
Renewals	16054	16499
Courtesy Members	0	5
<b>TOTAL</b>	<b>17656</b>	<b>18750</b>

## Registration Applications

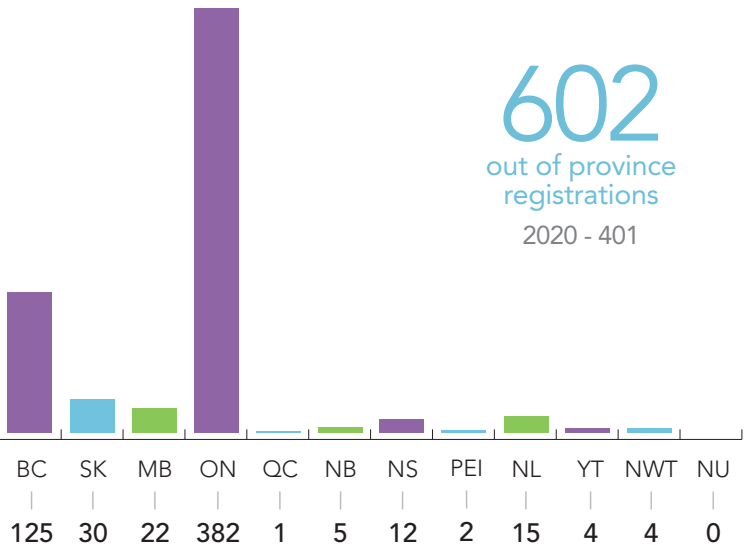
	2020	2021
Alberta Graduates NEW Applicants	934	1211
Canadian Out of Province NEW Applicants	558	895
International NEW Applicants	163	134
Reinstatements*	377	365
Re-Entry Applicants	0	48
Renewal Applicants	17023	18260
Courtesy Applicants	0	7
<b>TOTAL</b>	<b>19055</b>	<b>20920</b>

\*Reinstatement = a member whose practice permit lapsed at least one day.

Age of Active LPNs



Out of Province Registrations



Internationally  
Educated Nurse  
Registrations

China	1
Ghana	3
India	23
Kenya	5
New Zealand	1
Nigeria	8
Pakistan	6
Philippines	21
USA	1

69  
IEN registrations  
2020 - 75

## Active Registrants by Location

	2021	%
Area 0 - Out of Province/Country	1559	8.3%
AHS Area 1 - South Zone (Lethbridge & Medicine Hat)	1385	7.4%
AHS Area 2 - Calgary Zone	5826	31.1%
AHS Area 3 - Central Zone (Red Deer)	2573	13.8%
AHS Area 4 - Edmonton Zone	6157	32.8%
AHS Area 5 - North Zone	1250	6.6%
<b>TOTAL</b>	<b>18750</b>	<b>100%</b>



## Active Registrants by Place of Employment & Status

	Full-time	Part-time	Casual	2021	%
Association / Government	190	129	94	<b>413</b>	2.3%
Business / Industry / Occupational Health Centre	70	13	21	<b>104</b>	0.5%
Community Health / Health Centre	1078	960	633	<b>2671</b>	14.7%
Educational Institution	170	56	56	<b>282</b>	1.5%
Home Care Agency	452	173	252	<b>877</b>	4.8%
Hospital (General/Maternal/Pediatric/Psychiatric)	2138	2563	1462	<b>6163</b>	34.0%
Mental Health Centre	126	59	61	<b>246</b>	1.4%
Nursing Home / Long Term Care	2089	1672	1101	<b>4862</b>	26.8%
Nursing Stations (Outposts or Clinics)	5	4	5	<b>14</b>	0.0%
Physician's Office / Family Practice Unit	823	266	164	<b>1253</b>	7.0%
Private Nursing Agency / Private Duty	2	2	1	<b>5</b>	0.0%
Rehabilitation / Convalescent Centre	133	80	57	<b>270</b>	1.5%
Self-Employed	4	1	1	<b>6</b>	0.0%
Other	616	148	216	<b>980</b>	5.5%
<b>TOTAL</b>	<b>7896 (43.5%)</b>	<b>6126 (33.8%)</b>	<b>4124 (22.7%)</b>	<b>18146*</b>	<b>100%</b>

\*1559 are working out of province or out of country.



## CONTINUING COMPETENCE

As part of registration with the CLPNA, LPNs must consistently maintain and enhance their competence in nursing practice and be aware of strengths and areas in need of improvement. Continuing competence is essential in meeting the demands of evolving practice environments and patient needs, and the CLPNA's Continuing Competence Program (CCP) provides LPNs with a framework for assessing it. The CCP also supports LPNs to achieve and demonstrate continuing competence through ongoing learning and remaining current in practice.

The CCP guide and video were redesigned to assist registrants in understanding their overall responsibilities relating to the CCP. Understanding Restricted Activities became a mandatory learning module for LPNs within the CCP and must be completed by June 30, 2022.

The Continuing Competence Program Audit selects approximately 10 percent of LPNs annually to verify participation in the CCP and evaluate the impact of that learning on nursing practice. Due to the many challenges

arising from the continuation of the COVID-19 pandemic, the CLPNA cancelled its Continuing Competence Program Audit for 2021. Though an audit was not conducted, CLPNA's registrants must still comply with CCP requirements through the annual Registration Renewal process.

To meet the mandate of public protection, the CLPNA provides ongoing education to support the continuing competence of LPNs. In 2021, this included 39 webinars covering a variety of topics. Fitness to practice, and mental health and wellness were main topics of focus related to the impact of the pandemic on frontline healthcare providers, including LPNs.

Competence-related projects included:

- Continued delivery of webinars on Connecting Regulation to LPN Professional Practice; Regulation Changes for LPNs; Immunization Regulation and Reporting Requirements.
- Collaboration with University of Alberta's Faculty of Medicine and Dentistry
  - to provide webinars on Caregiver-Centered Care and Partnering with Family Caregivers During a Pandemic,
  - to provide the Caregiver-Centered Care COVID-19 course on the Caregiver-Centered Care website, and
  - to create the Partnering with Family Caregivers During a Pandemic learning module.
- Collaboration with the University of Alberta to develop a webinar on the topic of ageism to assist LPNs in understanding ageism, with strategies to recognize and mitigate it in their nursing practice.
- Collaboration with Alberta Health to provide LPNs with access to the Canadian Paediatric Society's courses, Education Program for

Immunization, Moving to Acceptance: How to address vaccine hesitancy in your busy practice, and Our Best Shot at Beating COVID-19: Overcoming Vaccine Hesitancy.

- Collaboration with medical legal experts on development and presentation of webinars based on predominant legal issues identified in nursing practice to help LPNs better understand their ethical commitments.

## EDUCATION STANDARDS ADVISORY COMMITTEE (ESAC)

ESAC confirms its role of supporting public safety through the application and integration of education standards for practical nurse diploma, advanced practice education programs, and practical nurse refresher programs as reflected in program reviews and annual reports. Two Refresher Programs at Lethbridge College and Medicine Hat College were approved to implement a new program in 2021. No applications for new Advanced Education Programs were received. One new PN Diploma Program at Grande Prairie Regional College was approved to implement.

ESAC continues to monitor all approved programs' compliance with education standards through regularly scheduled reviews, and annual report submissions. All reviews conducted during 2021 were completed using a virtual platform. Committee staff and volunteers continued to assist members of the CLPNA professional staff to fulfill requirements of the HCA Licensing Assessment agreement with Alberta Health, and ESAC continues to review and develop additional resources for transparency and to support programs and other stakeholders.

All approved programs are listed on the CLPNA website along with the CLPNA Council approval status awarded.

## Practical Nurse Programs in Alberta

- Bow Valley College - Calgary, Airdrie, Okotoks, Strathmore, Cochrane, Three Hills (Prairie College)
- Columbia College - Calgary
- Grande Prairie Regional College  
Grande Prairie
- Keyano College - Fort McMurray
- Lethbridge College - Lethbridge
- Medicine Hat College - Brooks Campus
- NorQuest College - Edmonton, Wetaskiwin
- Northern Lakes College - Slave Lake, Lloydminster, Grande Prairie, High Prairie, Peace River/High Level, Wabasca
- Portage College - Cold Lake, Lac La Biche, St. Paul
- Red Deer Polytechnic (formerly Red Deer College) - Red Deer, Drumheller, Ponoka, Rocky Mountain House, Stettler

The CLPNA Learning Management System provided LPNs with member-only access to free, online education to support competence in practice. More than 20,000 completions of the learning modules occurred throughout the year. Topics include Understanding Restricted Activities, Immunization, Administering Blood and Blood Products, and more.

### CLPNA Learning Modules Completed (member access only)

	2021
Understanding Restricted Activities	3283
Immunization	2710
Administering Blood and Blood Products: Transfusion	1970
Administering Medications via CVC, PICC, and IVAD	1774
Administering Parenteral Nutrition	1643
Ear Syringing	1510
Dispensing of Medications	1138
Non-Ionizing Radiation	1110
PTSD Awareness & Mental Health and Wellness for LPNs	850
Caregiver Centered Care	797
Administering Diagnostic Imaging Contrast Agents	714
Administration of Nitrous Oxide	687
Protecting Patients from Sexual Abuse and Sexual Misconduct	630
Fetal Heart Monitoring	619
Resilience in Nursing	601
Medication Drug Calculation	320
Partnering with Family Caregivers During a Pandemic	206
<b>Total Modules Completed 2021</b>	<b>20562</b>



## Study with CLPNA Self-Study Courses Completed

	2021
Anaphylaxis	561
Diagnostic Tests & Laboratory Values	656
Elder Abuse	1577
Health Assessment	1559
Infection Prevention and Control	3270
Intravenous Infusion Therapy	826
Learning to Learn	180
Medical Language and Terminology	466
Medication Administration	1165
Medication Drug Calculation	731
Nursing Documentation	4013
Pressure Ulcers	944
Relational Practice	3070
<b>Total Courses Completed</b>	<b>19018</b>

Professional  
Development  
Webinars

**39** Webinars  
2020 - 32

**6644** Attendees  
2020 - 7056

# PROFESSIONAL PRACTICE



# CONDUCT

Under the authority of the *Health Professions Act* (HPA), the CLPNA is responsible for regulating the LPN profession in a manner that protects the public from unsafe or unethical practice. This is accomplished through the provision of guiding documents. These documents provide evidence-informed information to guide and support LPN professional practice. When guiding documents and principles—Standards of Practice, the Code of Ethics, or other legislation which guides the profession—are not met by an LPN, a complaint may be generated against the regulated member. The CLPNA's Conduct department receives, investigates, manages, and resolves complaints made against regulated members (or former members if it is within two years of the lapse of their registration).

The CLPNA receives complaints from several sources and all complaints are investigated to ensure the safety of the public and LPNs. The HPA defines and outlines the formal complaint process that must be followed to manage complaints of unprofessional conduct against LPNs. The CLPNA makes every effort to handle complaints promptly.

Notice of receipt of a complaint or that information is being treated as a complaint must be provided to the complainant within 30 days, according to the HPA.

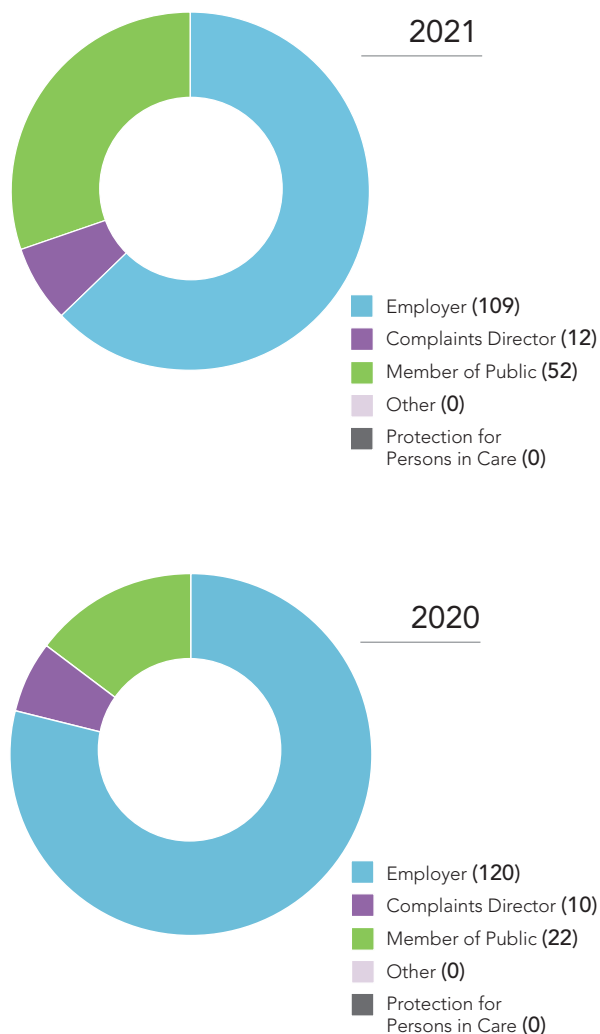
In 2021, the CLPNA responded to complaints, on average, within 1.5 business days. Complaints were handled within the timelines specified by the HPA and the procedures outlined by the CLPNA. During the COVID-19 pandemic, investigations were managed remotely, by phone or videoconference, to align with Alberta Health's COVID-19 guidelines.

In 2021, the CLPNA received three complaints which centred around sexual abuse/sexual misconduct towards a patient. These complaints were handled following the guidelines in the HPA. One of the sexual abuse complaints has been dismissed and the other complaint has been referred to a disciplinary hearing. The sexual misconduct complaint remains under investigation. The CLPNA's website provides specific information to the public regarding sexual abuse/ misconduct to enhance understanding of this type of conduct and the importance of reporting, as well as information on how to submit a complaint and a detailed outline of all conduct processes.

Bill 30 introduced an increase, from 25 to 50 percent, in the number of public members that are required to sit on a Hearing Tribunal Committee, Complaint Review Committee, and the Council Appeal Committee.

Historical Comparison	2020	2021
New Complaints Received	169	173
Previous Years' Complaints in Process	98	74

## Source of Complaints



## Types of Complaints Received in 2021

Abandonment	3
Breach of Confidentiality/Privacy	6
Bullying	15
Clinical Competence - Documentation	1
Clinical Competence - Health Assessment	2
Clinical Competence - Medication Administration	12
Clinical Competence - Multiple	62*
Drug Diversion	2
Failed to Cooperate with Investigation	0
Incapacity (Mental/Physical)	2
Neglect	4
Non-Nursing Conduct**	1
Patient Abuse - Mental	0
Patient Abuse - Physical	2
Patient Abuse - Verbal	1
Practicing Without a Permit	8
Sexual Abuse/Misconduct - Patient	3
Sexual Abuse/Misconduct - Co-worker	1
Substance Abuse	0
Theft	2
Therapeutic Nurse-Client Relationship	3
Unethical Conduct	20
Unprofessional Communication	21
Working Outside Scope of Practice	2
<b>Total Complaints Received in 2021</b>	<b>173</b>

\*Number reflects the fact that a complaint may have several competency issues (ranging from assessment, documentation, medication administration).

\*\*Non-Nursing Conduct includes behaviour that harms the profession and isn't directly related to nursing care.

## Current Status of Files Received in 2021

Incapacity	2
Investigation - In Progress	52
Investigation Report - Internal Review	7
Investigation - Legal Review	5
Referred to Hearing / Hearing Pending	4
Monitoring Orders	11
Complaint Review Committee Pending	2
Undertaking Pending	3
Files Closed	87
<b>Total Complaints Received</b>	<b>173</b>

## Disposition of Complaints Closed in 2021

(includes files from previous years)

Complaint Withdrawn	11
Complaints Dismissed	28
Employer Resolution with Sanction	1
Hearings Complete	39
Handled at the Workplace	12
Informal Resolution (Agreement & Undertaking)	64
Member Deceased	1
Registration Surrendered	1
Resolution with Sanction	23
Sec 55 – Undertaking - Practicing Without A Permit	8
Resolved	1
Unresolved	0
Section 118 (Non-Disciplinary)	10
Council Appeal Committee Appeal Complete	0
<b>Complaints Closed</b>	<b>199</b>

## Files Related to Incapacity

During an investigation of a complaint, it may be determined the conduct may have been a result of incapacity. The complaint is then managed under section 118 of the *Health Professions Act* and is not considered to be a matter of unprofessional conduct.

In 2021, there were two files under incapacity status. There were files from previous years (from 2018 to 2020) which remain ongoing.

## Hearings

There were 13 hearings held in 2021, comprising 19 complaint files (four members had multiple files). There are four files pending into 2022. As of 2019, all hearing decisions are published on the CLPNA website in alignment with legislative requirements and are open to the public.

All regulated members were found unprofessional by the Hearing Tribunal.

Reprimand	12
Hearing Costs	13
Fines	3
Education	11
Reflection Paper	2
Revocation of License	1
Suspension of Permit	2
Supervised Practice	2
Education - Prior to Reinstatement	1

## Appeals in 2021

The investigated member or the Complaints Director may appeal a Hearing Tribunal's decision to the Council Appeal Committee (CAC) which consists of two Council members appointed by the Council and two public members appointed by the Alberta government. In 2021, there were no appeals submitted to the CAC.

A complaint may be dismissed by the Complaints Director if there is insufficient evidence to support unprofessional conduct. A complainant may request the Complaint Review Committee (CRC) review the decision to dismiss. The Complaint Review Committee consists of two members appointed by the CLPNA's Council, and two public members appointed by the Alberta government. In 2021, there were two files submitted to the CRC; these appeals will be heard in 2022.

## PRACTICE AND POLICY

The CLPNA's registrant policies clearly outline the requirements and expected behaviours of Alberta's Licensed Practical Nurses. A policy may address regulatory functions mentioned in the *Health Professions Act* or practice expectations.

The CLPNA provides guidance and clarification to registrants, employers, and the public related to LPN scope of practice, legislation, and regulation to enable safety and ethical, competent nursing practice. This is accomplished through the development of guiding policy documents, practice consultations, and webinars that provide evidence-informed knowledge to guide and support public, registrant, and stakeholder understanding and expectations of the LPN profession.

In 2021, the CLPNA released four registrant policies, two info sheets, and one interpretive document. Three existing documents were redacted.

### Registrant Policy

- Declarations and Registration Requirements
- Refresher Program
- Actively Engaged Requirements for Registration and the Continuing Competence Program
- Conditions on a Practice Permit at Registration or Renewal

### Info Sheets

- Understanding the Difference: Regulator, Association, Union
- Naloxone and the Role of the Licensed Practical Nurse in Alberta

### Interpretive Document

- Fitness to Practice and HPA Definition of "Incapacitated"

### Redacted

- **Relaunch Guidelines** – related to public health restrictions the summer of 2021 and deemed no longer relevant
- **Mobile Devices** – the information was incorporated into the Virtual Healthcare Guideline
- **MAiD** – future queries received at CLPNA related to MAiD will be directed to the appropriate federal and provincial resources to ensure currency of guidance

In response to the ongoing COVID-19 pandemic, the CLPNA continued to provide updates through COVID-19 info sheets, providing information related to LPN practice and frequently asked questions about public health restrictions and pandemic response.

There were 2,343 practice consultations in 2021. These consultations varied in topic and complexity including clarification of LPN scope of practice, regulatory expectations, standards of practice and professional responsibilities, and pandemic-related concerns from registrants, stakeholders, and the public.

## PERFORMANCE MEASUREMENT AND RESEARCH

Performance measurement provides evidence on progress towards organizational goals, playing a critical role in increasing efficiencies as a regulator. We engaged in regulatory research to support strategic direction and ensure the CLPNA is responsive and aligned with regulatory best practice. As part of this commitment, in 2021, the CLPNA launched the Department of Performance Measurement and Research.

### CLPNA Performance Measurement Framework

Performance measurement provides evidence on progress towards organizational goals, playing a critical role in strategy execution and continuous improvement. In 2021, the CLPNA continued to build its measurement system to lay out strategic alignment throughout all levels of the organization. This included refinement of organizational strategic goals, a pilot of our performance measurement approach at the department level, and early work on dashboard utilization. The CLPNA plans to engage in knowledge mobilization activities to share our initial experiences with regulatory performance measurement.

### Knowledge Translation

The Performance Measurement and Research and Policy teams collaborated to create the presentation, *Innovate to Evaluate: Our Journey So Far in Reimagining the Policy Development Process* at the September 2021 Council on Licensure, Enforcement and Regulation (CLEAR) Educational Conference. The presentation focused on the integration of evaluation into the CLPNA policy development process.

Colleagues from other regulatory bodies reached out after the presentation to engage in follow-up discussions.

In collaboration with Dr. Jennifer Jackson from the University of Calgary, the CLPNA is engaged in a suite of projects to examine how work-related factors affect safe nursing practice. This collaboration resulted in the 2021 publication, *Licensed Practical Nurses' Perceptions of Their Work Environments and Their Intention to Stay: A Cross-sectional Study of Four Practice Settings*, in the journal *Nursing Open*. This study may offer insights around continuing competence as it examines nurse work environments, particularly in regard to LPNs' responsibilities and participation in their practice settings.

### Research Funding

The CLPNA granted research funds to Dr. Jennifer Jackson (University of Calgary) to conduct the study, *The Experiences of Becoming a Regulated Profession: A Qualitative Interpretive Description Interview Study of Health Care Aides (HCAs)*. The study aims to provide recommendations on how the CLPNA can support the regulation of HCAs. It will explore gaps in HCA understanding of their regulatory obligations to support safe practice. The study will take place over a 2-year period starting in early 2022.



# BUSINESS SERVICES





## ORGANIZATIONAL CULTURE

The CLPNA is committed to supporting the delivery of our mission through the promotion of a healthy organizational culture built in an environment of trust, respect, safety, and collaboration.

In 2021, the CLPNA grew its workforce as it onboarded nine permanent staff, as well as several temporary professionals, to support the delivery of our mandate. This was accomplished while continuing as a remote workforce that has been able to maintain a positive and engaged culture.

The CLPNA has made significant strides in its commitment towards diversity, equity, and inclusion (DEI). With the formation of an internal committee in December of 2020, the committee has developed a solid purpose and begun the development of principles and indicators to provide to CLPNA leadership. In late 2021, the CLPNA engaged an external consultant to develop DEI education for staff, leadership, and Council as well as a roadmap for continued DEI growth in the future. These steps reflect the CLPNA's efforts to embody the values LPNs are expected to demonstrate in their practice.

With the continuation of public health restrictions in 2021 and with safety remaining the priority, the CLPNA continued to support staff to remotely deliver operational services to members and the public. The CLPNA kept current and up to date on the COVID-19 pandemic, as well as related best practice and legal advice to best support and inform decisions on pandemic protocols, policies, and fostering a remote culture.

The CLPNA has moved all areas of work to a functional remote working environment, with privacy and safety key to organizational culture. For security, we implemented a secure two-factor login process for staff to access the CLPNA network. Internally, we also implemented several security tools to aid in our remote working environment that adhere to best practices. Privacy and confidentiality training was conducted for staff, Council, and committees throughout 2021 as a resource to reinforce this important area of work at the CLPNA.



## COMMUNICATIONS

Communications at the CLPNA concentrate on providing clarity, consistent branding, and continuous updating of relevant information through the CLPNA's website, social media platforms, CARE magazine, weekly newsletters, and public awareness campaigns. These communication mediums provide information about regulation, practice, research, ethics, and other relevant news to LPNs, stakeholders, and the public. As a regulator, communications are critical to our operations to ensure that LPNs understand the role of the CLPNA and understand their registration, continuing competence, and conduct requirements. It is also important that we communicate with the public regarding their safety in the healthcare system.

In 2021, CARE magazine evolved to adapt to regulation changes stemming from Bill 46. CARE launched a new media kit and remapped the magazine to become more regulatory in focus. The Fall/Winter edition of CARE was the last printed edition of CARE. Moving into 2022, CARE will be a digital magazine accessed through our website in PDF format or online through the Issuu platform. Two articles published in 2021 – Vital Support:

Caregiver-Centered Care, and Engaging Nursing to Diminish Ageism – provided research-based information to help LPNs make positive changes to their personal practice. Other articles published focused on regulatory updates such as:

- What's The Difference Between a Regulator, Association, and Union?
- How to Address Unprofessional Conduct
- LPNs' responsibility in Truth and Reconciliation
- How Healthcare Regulation Connects to Professional Practice

The CLPNA media relations and public awareness campaigns held several radio campaigns to acknowledge LPNs' and HCAs' work towards public protection throughout the pandemic. The campaigns were launched for Nursing Week (May), HCA Day (October), and the holiday season (December). The radio advertisements could be heard throughout the province, increasing public awareness of the CLPNA and our involvement in regulation.

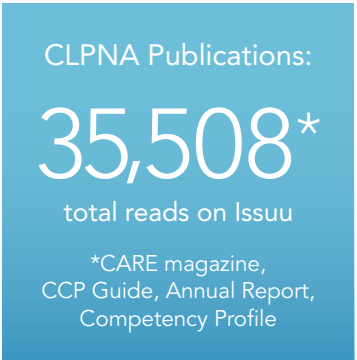
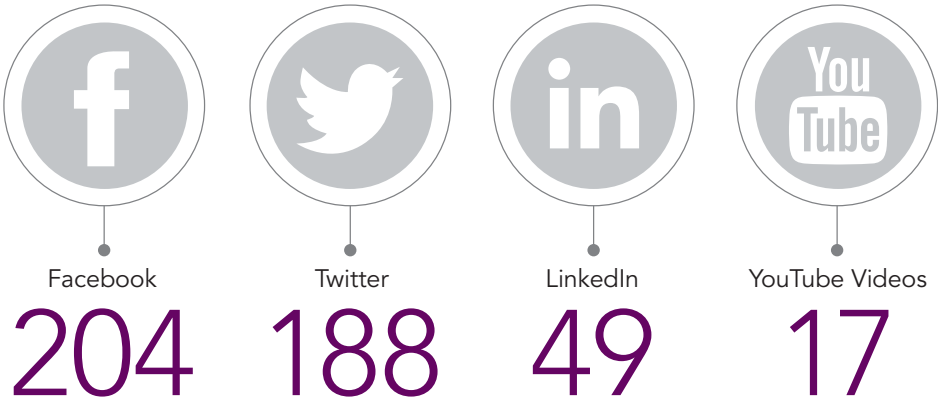


Throughout the pandemic, communicating regulatory information with CLPNA registrants and the public digitally was more important than ever.

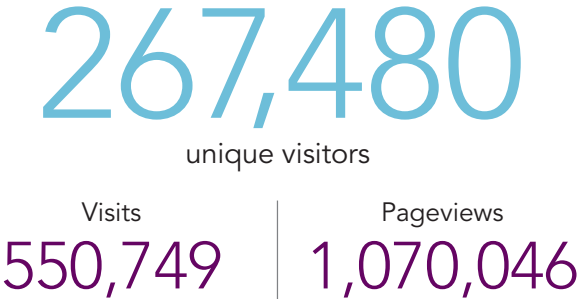
2021 Digital Communication Stats:



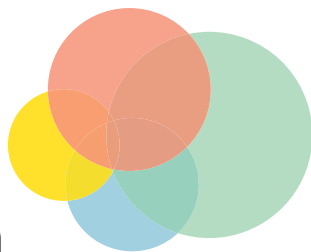
Social Media Posts:



2021 Website Stats:



# Alberta Health Care Aide Directory



Health Care Aides (HCAs) are an important part of Alberta's frontline healthcare workforce. The Alberta HCA Directory collects relevant demographic, employment, and core competency information of HCAs across Alberta. It also provides a centralized location for HCA information and updates. The HCA Directory is administered by the CLPNA.

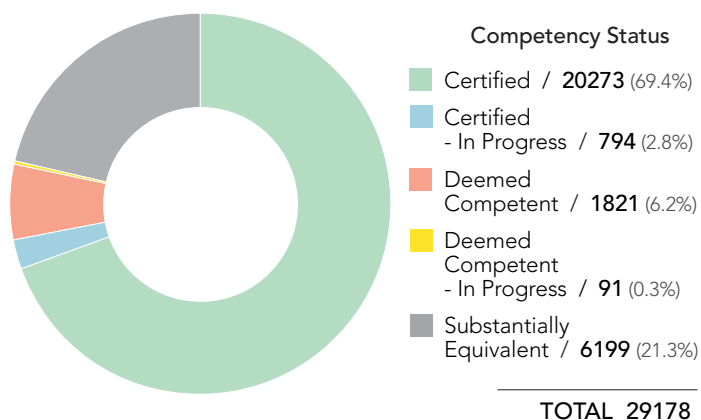
## RENEWAL OF HCAs ON THE DIRECTORY

An annual renewal was established to provide HCAs the opportunity to update their personal and workforce information and to validate that they want to remain part of the HCA Directory. Renewal was previously held from April 1 to June 30; however, due to the announcement of HCA regulation and timing, the renewal was changed to run from September 1 to November 30, 2021. So in 2021, renewal was delayed by five months; consequently, the usual 12 month renewal was held at 17 months. The delay resulted in many more HCAs having to re-validate their enrollment on the HCA Directory through the renewal. At the end of 2021 renewal, 29,178 HCAs renewed, and 6,500 HCAs did not.

## SUBSTANTIALLY EQUIVALENT APPLICANTS

The CLPNA launched a new Substantial Equivalence Assessment process in May 2020 and to date have received 1,630 applications. The specific requirements for the application process are outlined in the substantial equivalence assessment policies. The service standard timeline for complete applications to be assessed is a 12-week maximum.

## APPROVED HCAs as of November 30, 2021



**Certified:** HCAs who have successfully completed and received a Health Care Aide certificate in Alberta.

**Substantially Equivalent:** Graduates of a Health Care Aide program outside of Alberta, internationally educated nurses, and individuals with education as a Health Care Aide, personal support worker, continuing care assistant, nurse, or other profession considered to provide direct patient care.

**Deemed Competent:** HCAs who have no formal health care education and have been assessed using a completed competency assessment tool by a regulated nurse employed by an operator.

**In Progress:** Status applicants who have not yet successfully met all the requirements of that status group.

HCAs are provided information about how to reinstate.

## OVERVIEW OF YEAR-END STATISTICS

The following statistical reports provide an overview of the HCA workforce as of December 31, 2021.

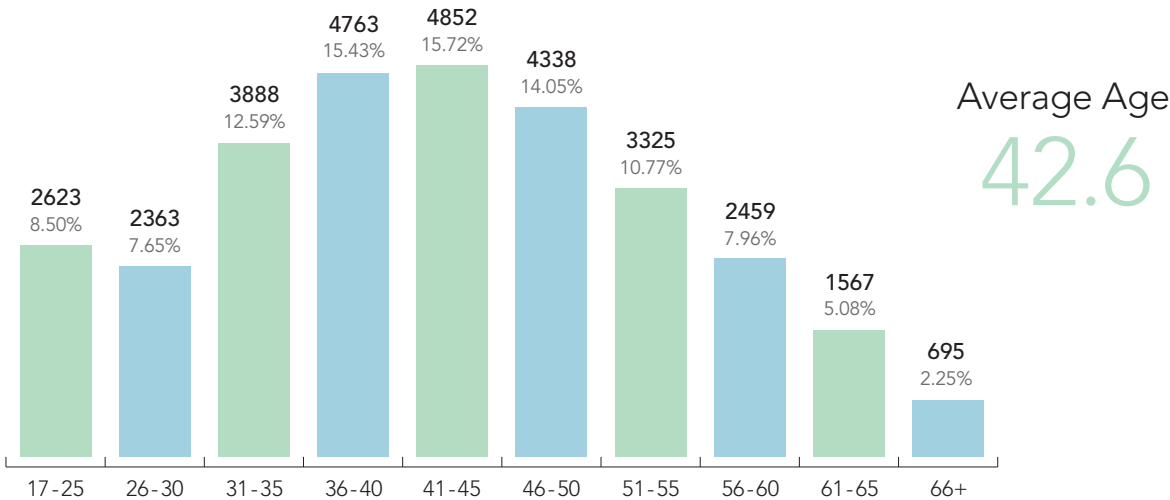
### Geographic Location

The province of Alberta is divided into the following five zones. The majority of the HCAs are located in the two major urban centres.

Zones in Alberta - December 31, 2021	Total	%
Area 0 - Out of Province/Country	226	0.7%
Area 1 - South Zone (Lethbridge & Medicine Hat)	2786	9.0%
Area 2 - Calgary Zone	10948	35.5%
Area 3 - Central Zone (Red Deer)	4907	15.9%
Area 4 - Edmonton Zone	10458	33.9%
Area 5 - North Zone	1548	5.0%
<b>TOTAL</b>	<b>30873</b>	<b>100.0%</b>

### Age

The majority of HCAs (57%) are between the ages of 30 and 50, unchanged from 2020. The average age of HCAs in Alberta in 2021 was 42.6 years of age, an increase from the average of 42.5 in 2020.



## Employment

Employer Type - December 31, 2021	Total	%
Alberta Health Services	6022	19.5%
Covenant Health	1282	4.2%
Contracted Operators	17473	56.6%
Non-Contracted Employers (Private Operators)	2331	7.6%
Other Type of Agency Not Listed	3765	12.2%
<b>TOTAL</b>	<b>30873</b>	<b>100.0%</b>

The primary employment of HCAs on the Directory is providing direct care in the continuing care sector. Due to a system error at the launch of renewal, employment information was not entered for 3,765 HCAs and is not reflected in the table below.

Facility Type by Primary Employer - December 31, 2021	Full-time	Part-time	Casual	Total	%
Association / Government	40	10	5	55	0.20%
Business / Industry / Occupational Health Centre	2	0	0	2	0.01%
Community Health / Health Centre	1044	1166	669	2879	10.62%
Educational Institution	35	17	73	125	0.46%
Home Care Agency	1217	728	1081	3026	11.16%
Hospital (General / Maternal / Pediatric / Psychiatry)	1091	1190	948	3229	11.91%
Mental Health Centre	227	107	83	417	1.54%
Nursing Home / Long Term Care	6223	6652	3175	16050	59.21%
Nursing Stations (Outposts or Clinics)	30	62	16	108	0.40%
Other	450	279	168	897	3.31%
Physician's Office / Family Practice Unit	28	18	13	59	0.22%
Private Nursing Agency / Private Duty	6	7	1	14	0.05%
Rehabilitation / Convalescent Centre	74	29	40	143	0.53%
Self-Employed	58	27	19	104	0.38%
<b>TOTAL</b>	<b>10525</b>	<b>10292</b>	<b>6291</b>	<b>27108</b>	<b>100.00%</b>

## HCA PROVINCIAL EXAM

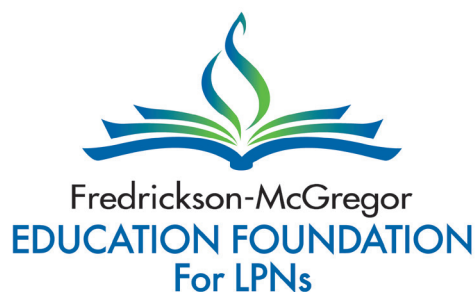
The Alberta Provincial HCA Exam is a psychometrically sound exam and tests the student's knowledge of the Health Care Aide Government of Alberta Provincial Curriculum (2019). The exam was launched on July 1, 2020. Since the launch of the examination to the end of 2021, there have been 1,642 first-time writers with 1,305 successfully passing the exam on their first write, resulting in a 79% pass rate.

## HCA BRIDGING MODULES

The HCA Bridging Modules were developed to bridge the gap in education from the 2013 HCA curriculum to the new 2019 curriculum. HCAs can access these modules through the Alberta HCA Directory free of charge.

There are four self-study Bridging Modules:

- Dementia
- Mental Health and Addictions
- Palliative and End-of-Life Care
- Professional Development



Encouraging LPNs to increasingly strive to enhance their competencies.

The Fredrickson-McGregor Education Foundation for LPNs has one goal in mind: encouraging LPNs to increasingly strive to enhance their competencies. The Foundation administers the proceeds of a \$3 million endowment fund to enhance LPN knowledge, skills, and ability. The CLPNA received a grant in 2006 from Alberta Health and Wellness to support continuing education needs of LPNs. Since that time, the CLPNA has provided oversight of the grant funds through the Fredrickson-McGregor Foundation.

In 2021, the Foundation Education Grant Program approved 249 applicants for a total of \$189,545.56. Since the Education Grant Program began in September 2006, the foundation has approved 7,443 applications for a total of \$3,396,040.96 in grants and distributed 74.5% of the approved funds.

## 2021 APPROVED EDUCATION

The grant administrator approves education that enhances LPN competencies. In 2021, the most requested education applied for included foot care, phlebotomy, and human service administration.

In 2021, fewer events were offered due to the pandemic. This is directly reflected in the total number of applications submitted. There has been a significant drop in applicants.

Volunteers of the Foundation Board carry on fundraising efforts, which include donations through Canada Helps and they continue to explore other opportunities for support. The Foundation discontinued the online sales of swag in 2021 due to many variables including a decrease in sales. The 2021 Foundation Awards were celebrated virtually through a video release of the award recipients, shared through the Foundation to celebrate and honour the Awards of Excellence recipients.

Top Grant-Approved Education of 2021	Funding Requests
Advanced Practice Foot Care	63
Human Service Administration/ Public Health (Long Term)	34
Orthopedic Specialty Applications (contains 4 courses)	19
Phlebotomy	13
Perioperative Specialty Applications (contains 4 courses)	9





# FINANCIAL HIGHLIGHTS

# Statement of Financial Position

December 31, 2021

2021

2020

## ASSETS

### CURRENT

Cash	\$ 7,753,668	\$ 5,802,936
Cash restricted for Health Care Aide Directory	-	73,732
Investments	7,310,601	7,213,702
Accounts receivable	177,015	15,508
Prepaid expenses	264,288	307,533
	15,505,572	13,413,411

### INVESTMENTS RESTRICTED FOR ENDOWMENT FUND

### CAPITAL ASSETS

3,306,655	3,085,590
1,186,336	1,361,156
<b>\$ 19,998,563</b>	<b>\$ 17,860,157</b>

## LIABILITIES

### CURRENT

Accounts payable and accrued liabilities	\$ 657,859	\$ 504,371
Deferred grant revenue	-	71,207
Prepaid registration fees	6,229,727	5,919,710
Deferred Health Care Aide licensing revenue	39,000	191,957
Deferred Health Care Aide substantial equivalence revenue	217,200	-
	7,143,786	6,687,245

### EMPLOYEE FUTURE BENEFITS - LONG TERM SERVICE AWARD

### LEASE INDUCEMENT

336,796	237,688
257,876	305,198
<b>7,738,458</b>	<b>7,230,131</b>

## NET ASSETS

Unrestricted	7,767,114	5,656,907
Internally restricted for Seniors Care Education	-	526,373
Restricted net assets		
Capital Fund	1,186,336	1,361,156
Endowment Fund	3,306,655	3,085,590
	<u>12,260,105</u>	<u>10,630,026</u>
	\$ 19,998,563	\$ 17,860,157

Approved by the Council



President



Vice President

## Statement of Operations

Year Ended December 31, 2021	2021	2020
<b>REVENUE</b>		
Registration fees		
Active	\$ 6,441,876	\$ 6,071,960
Out of province assessment	413,580	336,949
Late fees and fines	122,236	114,750
Associate	71,659	37,653
License verification	72,289	51,297
Consulting		
Health Care Aide special projects	655,853	299,403
Investigative	51,500	-
National examinations	480,631	310,200
Annual general meeting	-	6,000
Jurisprudence examination	62,606	34,546
Conduct fines	87,382	77,419
Program fees	11,000	36,500
Advertising	6,562	15,032
Investment income	67,070	114,248
Directory Enhancement grant	490,194	459,245
	<b>\$ 9,034,438</b>	<b>7,965,202</b>

## Statement of Operations

Year Ended December 31, 2021	2021	2020
<b>EXPENSES</b>		
Administration		
Public information	10,259	21,473
Rent and occupancy costs	280,437	262,951
Office and computer	614,606	525,100
Amortization of capital assets	207,408	256,627
Bank charges and interest	179,235	140,616
Postage	8,664	6,610
Professional fees	106,379	129,224
Telephone and utilities	25,783	34,804
Consulting fees	85,937	17,826
Printing	273	1,851
Travel	1,203	19,754
Jurisprudence project	27,260	33,770
Health Care Aide special projects	144,563	97,759
Directory Enhancement grant	490,194	459,245
Schedule of Personnel Costs	3,875,478	3,448,259
Schedule of Cost of Services	1,398,620	1,633,317
	<b>7,456,299</b>	<b>7,089,186</b>
<b>INCOME FROM OPERATIONS</b>	<b>1,578,139</b>	<b>876,016</b>
<b>OTHER INCOME (LOSS)</b>		
Unrealized gain (loss) on investments	(93,002)	16,214
Gain on disposal of investments	189,274	-
Loss on disposal of capital assets	(186,320)	-
	<b>(90,048)</b>	<b>16,214</b>
<b>EXCESS OF REVENUES OVER EXPENSES</b>	<b>\$ 1,488,091</b>	<b>\$ 892,230</b>

## Endowment Fund - Statement of Operations

Year Ended December 31, 2021	2021	2020
<b>REVENUE</b>		
Investment income	\$ 36,559	\$ 45,100
Unrealized gain (loss) on portfolio investments	(266,448)	76,141
Gain on disposal of long-term portfolio investments	655,658	1,010
	<b>425,769</b>	<b>122,251</b>
<b>EXPENSES</b>		
Brokerage fee	34,704	29,815
Donation to Fredrickson-McGregor Education Foundation	170,000	170,000
	<b>204,704</b>	<b>199,815</b>
<b>EXCESS OF REVENUE OVER (UNDER) EXPENSES</b>	<b>\$ 221,065</b>	<b>\$ (77,564)</b>

## Statement of Changes in Net Assets

Year Ended December 31, 2021						
	2020 Balance	Excess of revenues over (under) expenses	Invested in capital assets	Transfers	Remeasurement of defined benefit obligation	2021 Balance
Unrestricted	\$ 5,656,907	\$ 1,881,819	\$ (218,908)	\$ 526,373	\$ (79,077)	\$ 7,767,114
Internally restricted for Seniors Care Education	526,373	-	-	(526,373)	-	-
Capital Fund	1,361,156	(393,728)	218,908	-	-	1,186,336
Endowment Fund	3,085,590	221,065	-	-	-	3,306,655
	<b>\$ 10,630,026</b>	<b>\$ 1,709,156</b>	<b>\$ -</b>	<b>\$ -</b>	<b>\$ (79,077)</b>	<b>\$ 12,260,105</b>

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

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A large, stylized, light blue logo is positioned on the right side of the image. It features a circular shape with a thick, curved line that forms a partial circle, and a smaller, teardrop-like shape nested within it. The logo is composed of two main parts: a larger circular arc and a smaller, more complex shape that resembles a stylized 'A' or a teardrop. The overall design is clean and modern.

competent committed care



COLLEGE OF  
**LICENSED PRACTICAL NURSES**  
OF ALBERTA

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