



ARNPEI is moving towards a legislation change from the RN Act to a [Regulated Health Professions Act](#). We have shared the first legislation newsletter and key messages in October at the fall conference, as well as through email to all members. There will also need to be an associated jurisprudence exam which will eventually need to be added to the registration process

There are many questions still not answered about the legislation as well as the jurisprudence exam required for licensure. For example, criteria will need to be developed as to what circumstances will require a nurse to write the jurisprudence exam? It can be very different across the country as it varies across the country with some provinces having new grads write it, where another province may have anyone new coming into the province write it. Those decisions will be made through ARNPEI council and we will keep everyone well informed.

Please see below for a few Q&A's on jurisprudence.

What is Jurisprudence?

Jurisprudence is a legal term that refers to studying the law. For our purpose, jurisprudence is about ensuring you are aware of legislation, regulations, standards and policies that affect your registered nursing practice. It can be comparable to knowing the laws of driving a car. You must know the rules of the road and write an exam before getting a license to drive.

Why do I need to understand jurisprudence? We want to ensure you understand the law and standards that relate to your registered nursing and nurse practitioner practice. Increased awareness will help you to practice within the boundaries of the law and ultimately lead to greater client safety. This is especially important right now because the laws that direct our practice are about to change in Spring 2018. We are currently governed under The Registered Nurses Act but will be coming under The Regulated Health Professions Act soon.

Reference: [College of Nurses of Manitoba](#).

Key Changes Associated with RHPA

- The transformation from an Association to a College seems to imply more of a focus on regulation than members services and advocacy.
- There will be strength in numbers with respect to understanding, interpreting, and applying the RHPA because numerous professions will be subject to it, and all can learn from each other.
- The RHPA is slightly more modern than the *Registered Nurses Act*.
- The discipline process includes specific timelines which should help streamline processes.
- The RHPA gives both the respondent and the complainant the right to appeal discipline decisions to the Supreme Court.
- Audits of a member's practice are permitted under the RHPA, which can be useful in discovering practice problems before actual discipline offences occur.
- Members of Council will be more directly involved in decisions in the discipline process.
- There is a presumption that discipline hearings will be open to the public.
- A larger proportion of public representatives on Council (1/3 of Councilors).

ARNPEI President Cynthia Bryanton, RN

Hello to all and Happy Fall Days!

Change is underfoot at ARNPEI. When I googled the definition of the word change, the following words showed up. Change is to make different, to become different, to make something different from what it was. The key leadership positions of ARNPEI will soon be changing with a new hire of Ex. Director Dr. Sheila Marchant-Short and Coordinator of Regulatory Services. While this is an exciting time it is also bittersweet as both Becky and Vicki leave their positions for other chapters of their life journey. Sincere thanks and best wishes to them both. No doubt our nursing paths will continue to cross.

Another significant change for us is that the Registered Nurses Act will be repealed this fall and be replaced with the Regulated Health Professions Act, suggested implementation date is March 2018. Our name will change to College of Registered Nurses of PEI. Our current mandate and objects of ARNPEI will likely continue under the legislation with minor changes. Examples of objects include: regulate the practice of the profession and govern its members in accordance with the act, the regulations and bylaws; to develop, establish, maintain, monitor and enforce standards of practice to enhance the quality of practice, and to promote and enhance relations between the college and its members, other colleges, key stakeholders and the public. The change from Association to College seems to reference more of a focus on regulation than member services and advocacy. The discipline process includes specific time lines which should help streamline the process. The new act gives both the respondent and the complainant the right to appeal discipline decisions to the Supreme Court. Members of Council will be more directly involved in the decisions of the disciplinary process. There will need to be increased public representation on Council (1/3 of Councilors).

There is still lots to learn, change and implement with the introduction of the new act... lots of opportunities for change to improve and enhance the nursing profession and work of the College of Registered Nurses of PEI. We will continue to provide updates as we move through the change. Again, my sincere thanks to all for the great work that is done everyday for Islanders. Nurses leading change in the best interests of those within our care ...we do make a difference!

Meet Nurse Practitioner Shannell MacKinnon NP



I completed my BScN at UPEI in 2004, and proceeded to have a diverse and fulfilling career as an RN. The majority of my career

was as an emergency room RN at the Queen Elizabeth Hospital, with experiences in ICU/CCU and northern outpost nursing. The skills and knowledge built as an RN have proved an invaluable asset for the progression to the next chapter of my career.

I have always known that I would advance my education and the nurse practitioner role felt like a natural progression for me. I graduated from Dalhousie University in 2015 with my Masters of Nursing- Nurse Practitioner (Family/all ages). For the past two years I have worked within the provincial diabetes program and primary care.

My role within the Provincial Diabetes Program is to provide care for islanders living with type 1 and 2 diabetes, who do not have access to a primary care provider. I work autonomously as well as collaboratively with clients and health team members to identify the best management as guided by evidence and theory, with careful consideration of the determinants of health. Achieving and maintaining optimal diabetes management is inherently a team effort. I have been privileged to work collaboratively with RNs, physicians, social workers and dieticians (amongst others) in order to assist patients in managing their life with diabetes.

Health education regarding diet and lifestyle is central to diabetes management- however, various medications are also available to assist with diabetes management for both blood sugar control and vascular protection. I assist patients in making the decisions for their care plan by ensuring they have evidence based information, engagement and opportunity for discussion. Each client is central in any decision.

Diabetes care is complex, and the technology is rapidly changing and expanding. As a part of my role in the diabetes program I am a member of the adult insulin pump team- caring for islanders who are using insulin pump therapy to manage their diabetes. While insulin pump devices, sensors, and blood glucose meters are key to care, the technology progresses at an astounding rate that challenges me to ensure I maintain my education levels in this ever-changing world of diabetes care.

Currently my role in primary care is providing prenatal care to women (who are referred from the patient registry) for up to 32 weeks, providing primary care to those clients living with diabetes, fill in for NP walk in clinics, and refer and collaborate

when appropriate to ensure optimum patient care.

Thank you to the nurse practitioners who have facilitated the growth and progression of the profession to where it is now. I look forward to all the opportunities for growth and learning that this role will bring, and to translate that learning and growth to the optimal care of the clients I am privileged to care for.

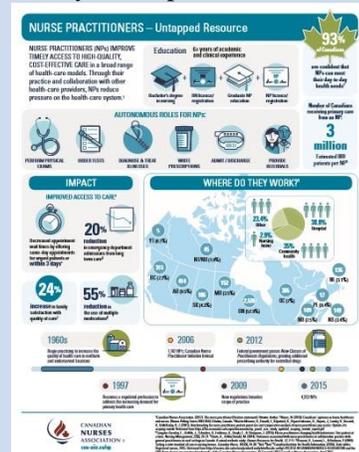
Nurse Practitioners

As a part of the ARNPEI strategic plan ARNPEI is working on a RN and NP campaign. Several educational tools have been shared with government, politicians, HPEI, members and the public.

What can Nurse Practitioners do?

Nurse Practitioners can:

- autonomously diagnose and treat illnesses,
- perform comprehensive physicals (check-ups), and take care of illnesses,
- treat your acute or chronic condition
- order blood work, x-rays and other diagnostic tests
- screen for health problems,
- manage chronic diseases like asthma, diabetes, hypertension and high cholesterol.
- monitor the health of babies, children, adults, and the elderly, and treat their illnesses should they get sick.
- take care of patients in nursing homes, or in specialty clinics.
- prescribe medications
- refer you to specialists for consultation



Read more facts on NPs go to [ARNPEI website](#) and [PEI NP association](#) or the [NP Association of Canada](#)