

ANNUAL REPORT 2011

RAPPORT ANNUEL 2011



CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES

CASN
ACESI ➤





CASN'S MISSION

MISSION DE L'ACÉSI

CASN (Canadian Association of Schools of Nursing) is the national voice for nursing education, research, and scholarship and represents baccalaureate and graduate nursing programs in Canada.

CASN's mission is to lead nursing education and scholarship in the interest of healthier Canadians.

l'ACESI (Association canadienne des écoles de sciences infirmières) est le porte-parole national pour l'enseignement et la recherche en sciences infirmières et représente le baccalauréat et les études graduées des programmes de sciences infirmières au Canada.

L'ACESI/CASN a pour mission d'être un leader dans l'enseignement et l'avancement des connaissances en sciences infirmières, dans l'intérêt d'une meilleure santé des Canadiens et des Canadiennes.

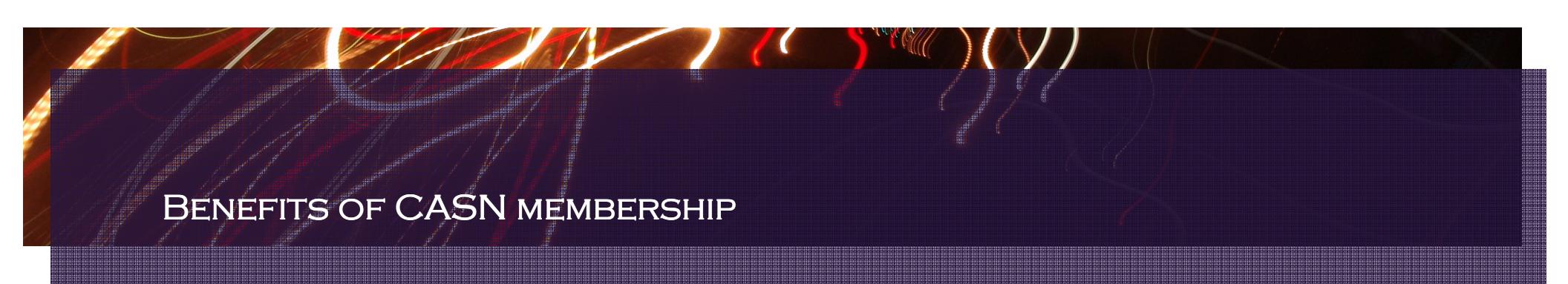
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BENEFITS OF CASN MEMBERSHIP	5
AVANTAGES DE L'ADHÉSION À L'ACESI	6
PRESIDENT'S MESSAGE	7
MESSAGE DE LA PRÉSIDENTE	8
EXECUTIVE DIRECTOR'S MESSAGE	9
MESSAGE DE LA DIRECTRICE GÉNÉRALE	10
STRATEGIC PLAN STATUS UPDATE / PLAN STRATÉGIQUE MISE À JOUR	12
AFFILIATE MEMBER REPORTS / RAPPORTS DES MEMBRES AFFILIÉS	28
BOARD OF DIRECTORS 2010-2011 / CONSEIL D'ADMINISTRATION 2010-2011	34
COMMITTEE MEMBERS 2010-2011 / MEMBRES DES COMITÉS 2010-2011	35
FINANCIAL STATEMENTS / RENSEIGNEMENTS FINANCIERS	38



BENEFITS OF CASN MEMBERSHIP

Participation in Nursing Education Leadership:

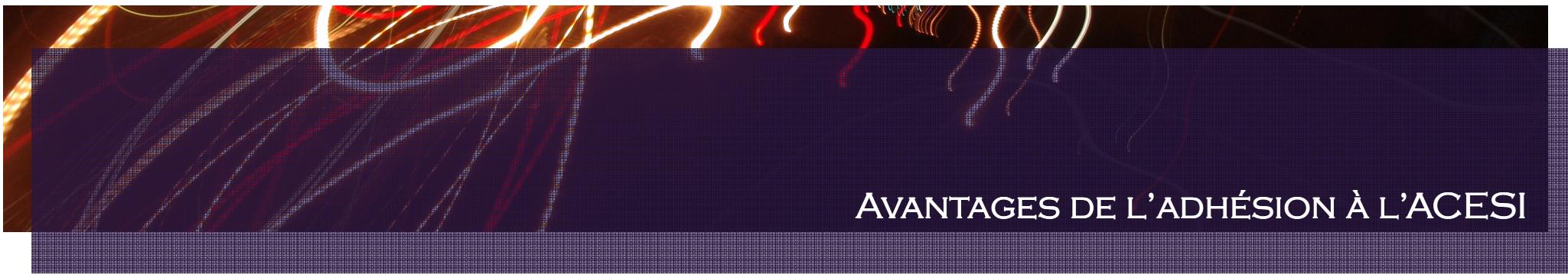
- Program accreditation.
- Support and lobby for baccalaureate nursing education in Canada.
- Professional development and advancement through:
 - Participation on national committees focusing on nursing education issues;
 - Research and scholarship through the work of committees and task forces;
 - Opportunities to contribute to nursing education as an accreditation reviewer.
- Political action and policy development through CASN position statements, policies and other key initiatives.
- Faculty and curriculum development through the use of tools such as “substantive content” educational resource banks.
- Advancing research and scholarship in nursing education.
- Representation and information on global nursing education issues.
- Inclusion of your school’s nursing programs in the CASN education programs database.
- A link to your school’s nursing program on the CASN website.
- Educational Leadership Awards and awards for Research and Administration in Nursing Education.
- Discounts on CASN conference fees.
- Dissemination of announcements and information through the CASN monthly newsletter NewsUpdate and the CASN website.
- Fact Sheets that can assist you as a nurse educator and/or leader.

Opportunities for Networking:

- Access to national and international conferences co-sponsored by CASN.
- Representation on CASN national committees and task forces, and on external committees and working groups.
- CASN representation at regional and national conferences, symposia and meetings attended by other nurse educators, health professionals and decision-makers.
- Affiliation with the Canadian Nursing Students’ Association (CNSA).

CASN IS ACTING FOR YOU!

- Collaboration with the Canadian Nurses Association (CNA) on key initiatives such as the annual Student & Faculty Survey.
- Leadership in the Canadian Consortium for Nursing Research and Innovation.
- Linking nursing education and practice through national and provincial dialogue and action.
- Promotion of the Dr. Pat L. Griffin Fund of CASN for research in nursing education.
- Development of baccalaureate level educational competencies, such as in palliative/end-of-life care and community/public health.
- Addressing the challenges of providing clinical/practice education placements.
- Collaboration with national accrediting bodies of other health professions to promote interprofessional education.
- International collaboration with other organizations promoting nursing education and research through GANES.



AVANTAGES DE L'ADHÉSION À L'ACESI

Contribution au leadership en formation infirmière

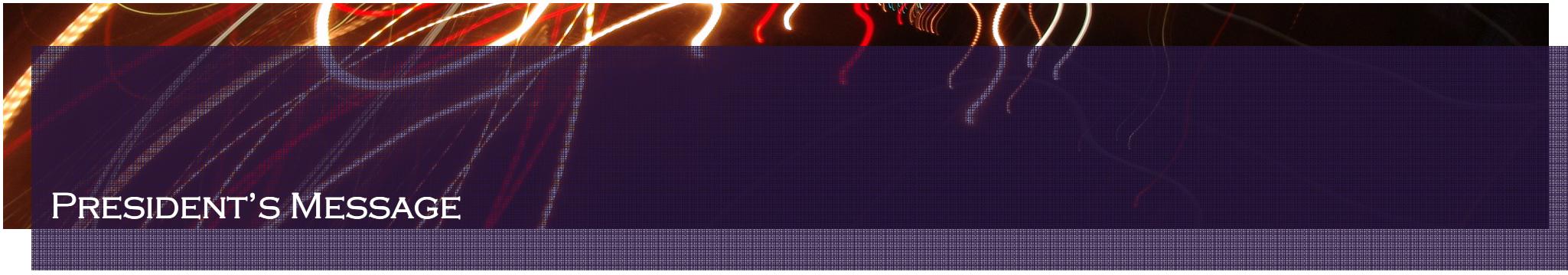
- Agrément de programmes.
- Appui et lobbyisme en faveur d'une formation de premier cycle pour le personnel infirmier au Canada.
- Perfectionnement et avancement professionnels :
 - par la participation à des comités pancanadiens axés sur les questions d'intérêt en matière de formation infirmière;
 - par la recherche et l'avancement des connaissances grâce aux efforts de comités et de groupes de travail;
 - par la possibilité de contribuer à la formation en soins infirmiers à titre d'évaluatrice ou d'évaluateur aux fins de l'agrément.
- Action politique et élaboration de politiques par l'entremise d'énoncés de position, d'interventions et d'autres grandes initiatives de l'ACESI.
- Développements du corps professoral et des programmes grâce à l'utilisation d'outils tels que les bases de données de ressources éducatives.
- Améliorer la recherche et l'avancement des connaissances en sciences infirmières
- Représentation et information au sujet des questions d'intérêt mondial qui touchent la formation infirmière.
- Inclusion des programmes de sciences infirmières de votre école dans la base de données de l'ACESI.
- Publication d'un lien vers le programme de sciences infirmières de votre école sur le site Web de l'ACESI.
- Nombreux prix pour récompenser le leadership pédagogique ainsi que pour l'excellence en recherche infirmière et l'excellence en gestion universitaire.
- Rabais consentis sur les droits d'entrée aux conférences de l'ACÉSI.
- Diffusion d'annonces et d'information dans le bulletin mensuel *Mise à jour* de l'ACESI et sur le site Web de l'organisme.
- Accès à des fiches de renseignements utiles au personnel infirmier enseignant et aux chefs de file du domaine.

Réseautage

- Accès à des conférences coparrainées par l'ACESI au Canada et à l'étranger (p. ex., leadership dans l'enseignement des sciences infirmières, GANES).
- Représentation au sein de comités et de groupes de travail de l'ACESI ou d'autres organismes.
- Possibilité de représenter l'ACESI à l'occasion de conférences, de réunions et de colloques régionaux et nationaux auxquels assistent d'autres membres du personnel infirmier éducateur, des spécialistes de la santé et des décisionnaires.
- Affiliation de l'ACESI à l'Association des étudiant(e)s infirmier(ière)s du Canada (AEIC).

L'ACESI EST LÀ POUR VOUS!

- Collaboration avec l'Association des infirmières et infirmiers du Canada (AIIC) pour réaliser l'enquête auprès des étudiantes, des étudiants et du personnel enseignant ainsi que huit grands projets qui seront mis en oeuvre au cours des prochaines années (portail de l'AIIC, bases de données, travaux à l'étranger, planification et action stratégiques, etc.).
- Leadership au sein du consortium canadien de la recherche et de l'innovation en sciences infirmières.
- Resserrement des liens entre l'enseignement et la pratique des sciences infirmières grâce à divers débats et mesures à l'échelle canadienne ou provinciale.
- Promotion du Fonds Pat-L.-Griffin de l'ACESI, consacré à la recherche en formation infirmière.
- Collaboration avec d'autres organismes d'agrément nationaux afin de promouvoir la formation interprofessionnelle.
- Collaboration internationale avec d'autres organismes afin de promouvoir, à travers GANES, la gestion universitaire et la recherche.



PRESIDENT'S MESSAGE

Chères collègues, Dear Colleagues,

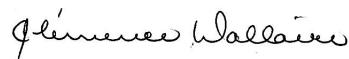
This last year has signaled a shift in focus for the CASN Board of Directors to accommodate the growth of the organization. Moreover, this shift is also responding to increasing demands on CASN as the voice of nursing education and scholarship in this country. For those reasons, in November of 2010, the CASN Board of Director's voted unanimously to become a policy Board, to focus more actively on advocating for nursing education and to ensure an active dialogue with all stakeholders in the domain of nursing education.

The growth of CASN and this move to a policy board necessitated some adjustment to the bylaws and policies to support the organization in our current and future endeavors. That's why the Board of Directors has been actively involved in supporting the Task Force on Governance and their work of revising the CASN Bylaws. Meanwhile, special attention has been given to support a policy board and to align the bylaws and policies with changes in the legislation surrounding bylaws for not for profits and charitable organizations. The proposed bylaws should provide better support for CASN's mission.

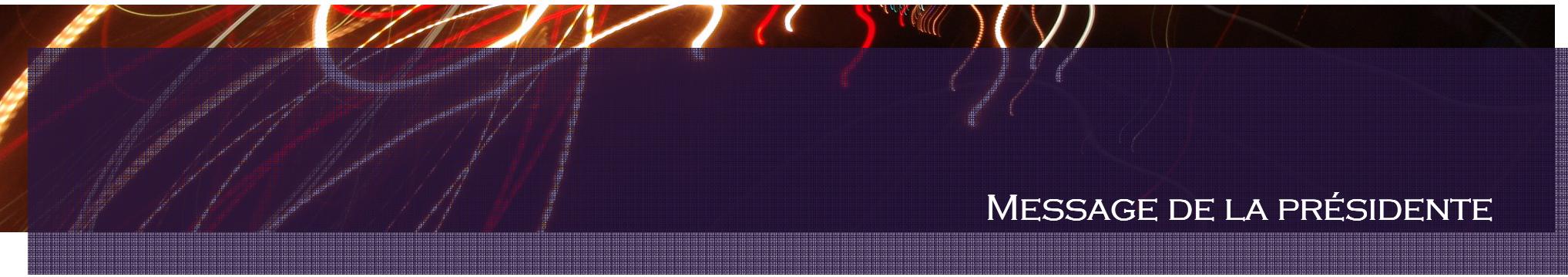
During the last few years, advanced education has been the focus of attention and CASN has been active in supporting the development of all advanced practice degrees. This year, CASN held the inaugural Nurse Practitioner Forum to facilitate a dialogue to further the development of a national consensus on the education of nurse practitioners in Canada. The event led to a dialogue on the key components of Nurse Practitioner Education in Canada and contributed to a draft document on the Essential Components of Nurse Practitioner Education. These are just some examples of how CASN is working towards a national discourse on graduate education for advanced practice nursing.

More recently, research reports have alerted us to the difficulties facing advanced nursing practice in this country. Thus, CASN has initiated a Task Force on Advance Practice Nursing to create partnerships with all levels of government as well as stakeholder and other professionals in order to create a platform for interdisciplinary discourse on the place of Advanced Practice Nursing in Canada, and how to enhance the education of advance practice nurses. As president, I attended two Health Forums on advanced practice nursing held at McMaster University in Hamilton, in July of 2011. These Forums brought together stakeholders in a dialogue with 15-18 officials, leaders, citizens, and scientists to discuss the integration of advanced practice nursing in the health care system in Canada. CASN as a voice for nursing education in this country is taking steps to contribute to the discussion on Advanced Practice Nursing and make sure that issues about graduate education are included, whether they are about Nurse Practitioner, Clinical Nurse Specialist or Advanced Practice Nurses. In conclusion, these examples illustrate how CASN is moving more actively into its role to advocate for Nursing Education. This coming year we will continue to strive towards these goals. I look forward to working with you all in the coming months.

Sincerely,



Clémence Dallaire
President
Canadian Association of Schools of Nursing



MESSAGE DE LA PRÉSIDENTE

Chères collègues, Dear Colleagues,

Au cours de la dernière année, le Conseil d'administration de l'ACÉSI a subi un ajustement de focalisation lui permettant de s'adapter à la croissance de l'organisme. De plus, cet ajustement répond aux demandes croissantes sur l'ACÉSI comme porte-parole de l'enseignement en sciences infirmières et des bourses d'études au pays. À cet effet, en novembre 2011, le Conseil d'administration de l'ACÉSI a voté à l'unanimité de devenir un conseil de formulation des politiques, dans le but de se concentrer plus activement sur la mise en valeur de l'enseignement en sciences infirmières et d'assurer un dialogue actif avec tous les partenaires du secteur de l'enseignement en sciences infirmières.

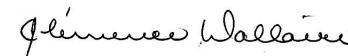
La croissance de l'ACÉSI et cette initiative pour devenir un conseil de formulation des politiques ont exigé quelques ajustements aux règlements et aux politiques d'appui de l'organisme dans nos activités courantes et futures. C'est pourquoi le Conseil d'administration appuyait activement le Groupe de travail sur la gouvernance et sa révision des règlements de l'ACÉSI. Entre-temps, une attention particulière a été accordée pour appuyer un conseil de formulation des politiques et pour harmoniser les règlements et les politiques avec les changements relatifs aux règlements gouvernant les organismes sans but lucratif et caritatifs. Les règlements proposés devraient mieux appuyer la mission de l'ACÉSI.

Au cours des dernières années, l'ACÉSI a concentré son attention sur l'enseignement supérieur et a soutenu vivement le développement de tous les grades en pratiques avancées. Cette année, l'ACÉSI a tenu son forum inaugural pour infirmières praticiennes, en vue d'encourager le dialogue et faire avancer le développement d'un accord commun national sur l'enseignement des infirmières praticiennes au Canada. Cet événement a conduit à un dialogue sur les éléments clés de l'enseignement des infirmières praticiennes au Canada et il a contribué à la rédaction d'une ébauche sur les composantes essentielles de l'enseignement des infirmières praticiennes. Ce ne sont que quelques exemples qui démontrent comment l'ACÉSI vise un échange national sur la formation supérieure en matière de pratique infirmière avancée.

Récemment, des rapports de recherche nous ont signalés les difficultés qu'une pratique infirmière avancée affronte au pays. L'ACÉSI a donc mis sur pied un Groupe de travail sur la pratique infirmière avancée visant à créer des partenariats avec tous les ordres de gouvernement ainsi que les intervenants et autres professionnels, visant à créer une tribune d'échange multidisciplinaire sur le rôle de la pratique infirmière avancée au Canada, et visant à déterminer comment mettre en valeur l'enseignement des infirmières en pratiques avancées. Comme présidente, j'ai assisté à deux forums sur la santé portant sur la pratique infirmière avancée, qui ont eu lieu à l'Université McMaster, à Hamilton, en juillet 2011. Ces forums rassemblaient des intervenants pour un dialogue entre 15 et 18 agents responsables, dirigeants, citoyens et travailleurs scientifiques pour discuter de l'intégration de la pratique infirmière avancée au sein du système de santé canadien. L'ACÉSI, comme porte-parole pour la formation en sciences infirmières au pays, prend des mesures pour contribuer à la discussion sur la pratique infirmière avancée et pour s'assurer que les enjeux de l'enseignement supérieur soient inclus, soit ceux des infirmières praticiennes, les infirmières cliniciennes spécialistes, ou les infirmières en pratique avancée.

Pour terminer, ces exemples illustrent comment l'ACÉSI s'avance plus activement dans son rôle de promotrice de l'enseignement en sciences infirmières. Durant l'année qui vient, nous continuerons de nous efforcer à atteindre ces objectifs. Je hâte de travailler avec vous tous dans les mois à venir.

Je vous prie d'accepter, Monsieur et Madame, l'expression de mes sentiments distingués,



Clémence Dallaire
Présidente
Association Canadienne des Écoles de Sciences Infirmeries



EXECUTIVE DIRECTOR'S MESSAGE

Dear Colleagues,

It is a pleasure for me to provide you with a report highlighting operational activities accomplished by CASN in 2010-2011. The CASN National Office is strongly committed to advancing the strategic priorities of the Association and to this end, has been very much engaged in supporting the implementation of CASN's Strategic Plan 2009-2014. The operational directions of the Association are guided by the four major priorities identified in the current strategic plan.

1. Advance and unify CASN's voice for nursing education leadership, partnership and policy;
2. Govern excellence in nursing education through accreditation;
3. Strengthen the standards of excellence for nursing education through research and scholarship;
4. Optimize nursing education resources including student, faculty and fiscal.

Political advocacy is a key to advancing "CASN's voice for nursing education, leadership, partnership and policy". There have been a number of new initiatives in 2010-2011 to increase CASN's influence on public policy.

- A CASN Political Advocacy Committee was struck
- A series of communications were sent, during the National Election, to the leader of each of the major political parties calling for increased attention and funding for nursing education and research in the interest of healthier Canadians.
- As the secretariat for the Canadian Nursing Research Consortium sent further communications to the leaders of the major political parties on behalf of the Consortium advocating for nursing research to be made a priority in the Election.



In order to ensure that CASN "governs excellence in nursing education through accreditation", the CASN Advisory Ad Hoc Committee on Accreditation continued to situate the CASN Accreditation Program as a leader in the field of accreditation of professional education both nationally as well as internationally. We were excited to implement the first two of four pilot international accreditation reviews stipulated in the CASN strategic plan in Australia and in Qatar.

The CASN's NP task force has been developing a national, consensus based vision of Nurse Practitioner education in Canada. This work was advanced at an inaugural NP Forum in Toronto in September 2011. The event contributed to two of the priorities of the strategic plan "optimizing nursing education resources including student, faculty and fiscal" as well as strengthening "the standards of excellence for nursing education through research and scholarship". The NP Forum facilitated dialogue on nurse practitioner education among stakeholders from all regions of Canada and resulted in a set of guiding principles and preliminary core components of NP education that will be further developed and refined through a consultative process in the next six months.

CASN has been carrying out a number of special projects to further the CASN goal of strengthening "standards of excellence for nursing education through research and scholarship", as well as the goal of advancing and unifying "CASN's voice for nursing education leadership, partnership and policy". These have included the following projects; the Palliative and End-of-Life Care project, the Canada Health Infoway Project, the Public health clinical placements Project, the Internationally educated nurses Project, and partnering in a project led by the Aboriginal Nurses Association promoting the integration of cultural competence and cultural safety in nursing education in Canada.

Our work on the CASN/CNA Student Faculty survey furthers the CASN strategic plan goal to "optimize nursing education resources including student, faculty and fiscal". Of note, the survey findings show a continued increase in nursing students at all program levels and indicate the need for faculty development to meet a projected shortfall. The survey findings are posted on the CASN website.

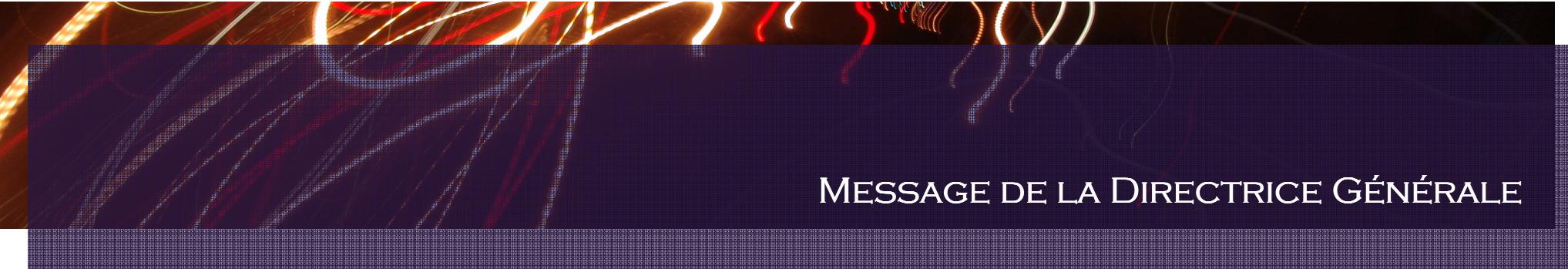
It was an honour to act as the secretariat for the Global Alliance for Nursing Education and Scholarship (GANES) again this year and to support initiatives undertaken by the alliance.

I look forward to working with all of you throughout the coming year

Sincerely,

A handwritten signature in black ink that reads "Cynthia Baker".

Cynthia Baker



MESSAGE DE LA DIRECTRICE GÉNÉRALE

Chères collègues

J'ai le plaisir de vous transmettre ce rapport sur les principales activités réalisées par l'ACÉSI au cours de l'exercice 2010-2011. Le Secrétariat national de l'ACÉSI a pris l'engagement de faire avancer les priorités stratégiques de l'association et, à cette fin, a travaillé vigoureusement afin d'assurer la mise en œuvre du plan stratégique 2009-2014 de l'ACÉSI. Les activités opérationnelles de l'association ont été axées sur quatre grandes priorités identifiées dans le plan stratégique actuel.

1. Favoriser le rôle de l'ACÉSI à titre de porte-parole uni sur les questions liées au leadership, au partenariat et aux politiques en enseignement infirmier;
2. Régir l'excellence en enseignement infirmier par le processus d'agrément;
3. Renforcer les normes d'excellence en enseignement infirmier au moyen de la recherche et de l'avancement des connaissances;
4. Optimiser les ressources disponibles en enseignement infirmier, y compris les ressources disponibles pour les étudiants, les ressources enseignantes et les ressources fiscales.

La promotion des politiques est un élément clé pour favoriser « le rôle de l'ACÉSI à titre de porte-parole uni sur les questions liées au leadership, au partenariat et aux politiques en enseignement infirmier ». En 2010-2011, plusieurs initiatives ont été lancées pour augmenter l'influence de l'ACÉSI sur les politiques publiques.

- Un Comité sur la défense des intérêts politiques de l'ACÉSI a été créé
- Plusieurs communiqués ont été expédiés au chef de chacune des grandes formations politiques pendant les élections fédérales soulignant le besoin d'augmenter le financement de l'enseignement et de la recherche infirmière dans l'intérêt de la santé des Canadiens.
- Dans le cadre de ses fonctions de secrétariat du Consortium canadien pour la recherche et l'innovation en sciences infirmières, l'ACÉSI a transmis d'autres communications aux chefs des grandes formations politiques au nom du Consortium afin que la recherche infirmière soit reconnue comme un enjeu prioritaire au cours des élections.

Afin d'assurer que l'ACÉSI puisse « régir l'excellence en enseignement infirmier au moyen de la recherche et de l'avancement des connaissances », le Comité constatif sur l'agrément de l'ACÉSI a régulièrement identifié le Programme d'agrément de l'ACÉSI comme le programme de premier plan dans le domaine de l'agrément d'enseignement universitaire aux échelles nationale et internationale. Nous avons eu le grand plaisir de lancer deux des quatre projets d'évaluation de l'agrément international énoncés dans le plan stratégique de l'ACÉSI. Les deux pilotes ont été lancés en Australie et à Qatar.

Le Groupe de travail sur la formation des infirmières praticiennes poursuit ses activités visant l'élaboration d'une vision nationale, axée sur le consensus, de la formation des infirmières praticiennes au Canada. Les travaux de ce comité ont bien progressé pendant le forum sur la formation des

infirmières praticiennes tenu à Toronto en septembre 2011. Cet événement a contribué à l'avancement de deux des priorités identifiées dans le plan stratégique « optimiser les ressources disponibles en enseignement infirmier, y compris les ressources disponibles pour les étudiants, les ressources enseignantes et les ressources fiscales » et « renforcer les normes d'excellence en enseignement infirmier au moyen de la recherche et de l'avancement des connaissances ». Le forum sur la formation des infirmières praticiennes était un lieu propice de dialogue qui a stimulé les échanges entre les parties prenantes provenant de toutes les régions du Canada. Le forum a abouti sur la formulation de principes directeurs et l'identification des composantes de base préliminaires de la formation des infirmières praticiennes. Les discussions se poursuivront pendant un processus consultatif qui aura lieu au cours des six prochains mois.

L'ACÉSI mène actuellement plusieurs projets spéciaux pour assurer la réalisation des objectifs de « renforcer les normes d'excellence en enseignement infirmier au moyen de la recherche et de l'avancement des connaissances » et de « favoriser « le rôle de l'ACÉSI à titre de porte-parole uni sur les questions liées au leadership, au partenariat et aux politiques en enseignement infirmier ». Les projets spéciaux en cours comprennent, entre autres, le projet sur les soins palliatifs et soins de fin de vie, le projet Inforoute santé du Canada, les projets de stages cliniques en santé publique, le projet sur les infirmières formées à l'étranger et le projet en partenariat avec le *Aboriginal Nurses Association of Canada* pour favoriser l'intégration de la compétence et de la sécurité culturelle dans l'enseignement infirmier au Canada. L'association a également eu l'honneur de se charger, encore cette année, des fonctions de secrétariat au nom de la *Global Alliance for Nursing Education and Scholarship* (GANES) et de soutenir les initiatives entreprises au nom de l'alliance.

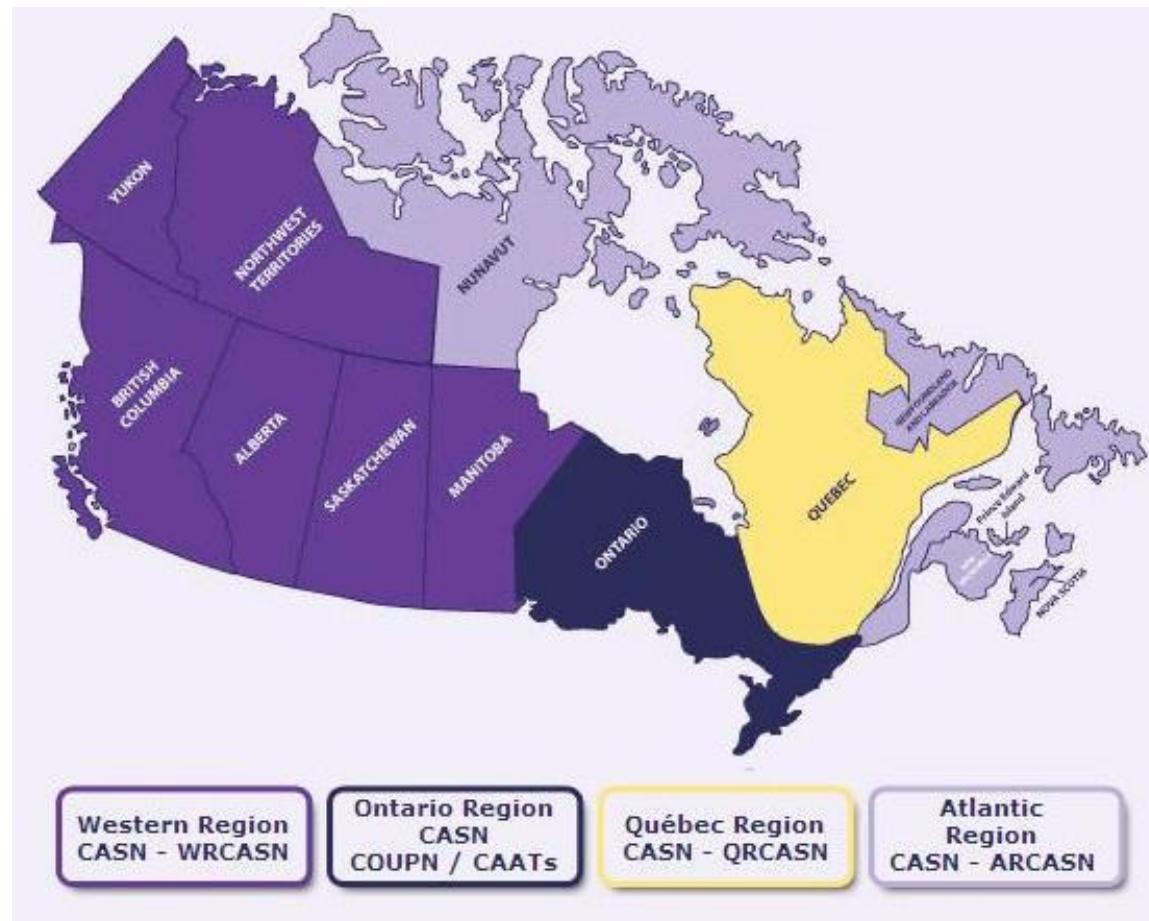
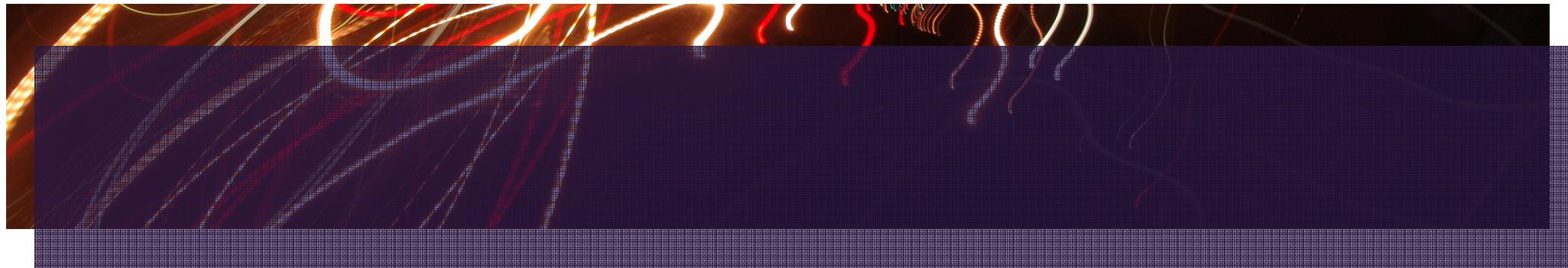
Notre travail de collaboration sur le sondage des étudiants et du corps professoral de l'AÉIC/AIIC répond à l'objectif stratégique «d'optimiser les ressources disponibles en enseignement infirmier, y compris les ressources disponibles pour les étudiants, les ressources enseignantes et les ressources fiscales ». Il est important de souligner que les résultats du sondage indiquent l'augmentation constante du nombre d'étudiants en sciences infirmières à tous les niveaux universitaires, ce qui confirme le besoin de formation des professeurs afin d'éviter toute pénurie dans ce domaine. Les résultats du sondage sont affichés sur le site web de l'ACÉSI.

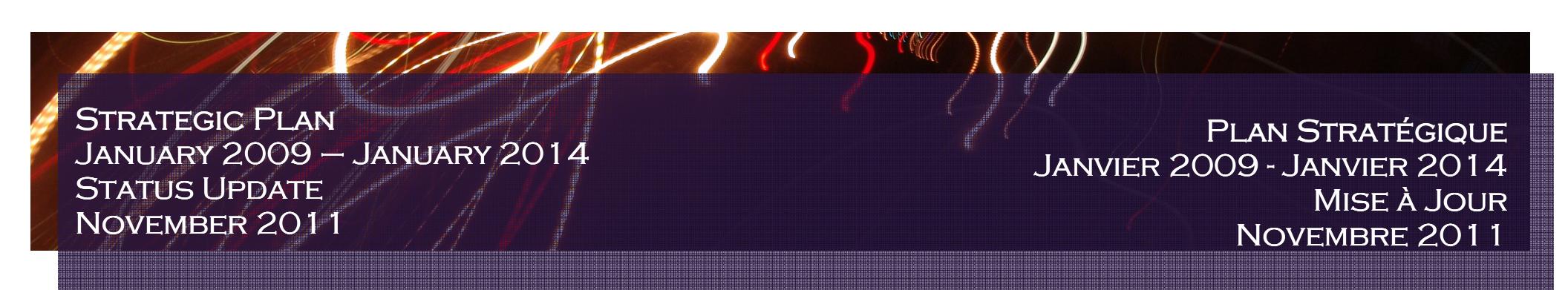
Un plaisir de poursuivre notre collaboration au cours de l'année à venir.

Salutations distinguées,



Cynthia Baker





STRATEGIC PLAN
JANUARY 2009 – JANUARY 2014
STATUS UPDATE
NOVEMBER 2011

PLAN STRATÉGIQUE
JANVIER 2009 - JANVIER 2014
MISE À JOUR
NOVEMBRE 2011

Outcomes	Outputs	Timeline	Status / Progress Report
Strategic Priority A: Advance and unify CASN's voice for nursing education leadership, partnership and policy Priorité A : Promouvoir le rôle de l'ACESI à titre de porte parole unique à l'égard du leadership, des partenariats et des politiques en enseignement des sciences infirmières			
<p>Outcome #1 Stakeholders seek input from CASN when making decisions dealing with issues or policies impacting nursing education and research</p> <p>Résultat 1 Les parties intéressées qui s'occupent de questions d'intérêt relativement à l'enseignement et à la recherche en sciences infirmières ou de politiques connexes consultent l'ACESI avant de prendre des décisions</p>	<p>1.1 Explore, identify and influence decision making processes 1.1 Recenser et étudier les processus décisionnels et exercer sur eux une influence</p>	Ongoing	<p>CASN Board members and national office staff participated in numerous international and national meetings and projects in order to advocate for nursing education both nationally and internationally. Activities included in the list below represent just some of the actions carried out in order to ensure that this outcome is realized.</p> <p><u>International Projects</u></p> <ul style="list-style-type: none"> ▪ Providing the secretariat for GANES. Active participation in GANES. ▪ Collaboration with Cowater International and McMaster University in successful CIDA nursing education development project proposal in Bangledash. ▪ 2 CASN projects presented at ICN (CARICOM project, Student, Faculty Survey). ▪ CASN presented a paper at the GANES conference in Washington in December on the linkages between competency development and accreditation standards. <p><u>National Projects</u></p> <p>Proposals developed by CASN and funded by Health Canada (ongoing).</p> <ul style="list-style-type: none"> ▪ Implementation of Entry to Practice End-of-life Palliative Care Competencies. ▪ Development of a National Framework to guide IEN Bridging Programs. ▪ Dissemination project of clinical practice guidelines for public health funded by Public Health Agency of Canada completed March 2011. ▪ A proposal was submitted in September 2011 to the Aboriginal Health Human Resources Initiative (AHHRI) to promote cultural competence and cultural safety in nursing education. <p><u>Partnerships with National Organizations</u></p> <ul style="list-style-type: none"> ▪ Partnered with CNA, CPHA, ACEN in planning the 2011 Nursing Leadership conference (planning committee member).

		<ul style="list-style-type: none"> ▪ Partner of CNA in the creation, dissemination and analysis of the Student and Faculty Survey. ▪ Advocacy partnership initiated with CNA through collaboration with CEO of CN A -meeting held of the President and President-Elect of the respective organizations to initiate advocacy partnership (February 14, 2011). ▪ Partnered with A.N.A.C in the development, distribution and analysis of the Cultural Competence and Cultural Safety survey to CASN member schools. ▪ Executive Director an advisory member of the CNSA Board; CASN Corporate Services provide administration support. ▪ Nursing Research Consortium secretariat. ▪ Partnered with Aboriginal Nurses Association of Canada (A.N.A.C), Assembly of First Nations (AFN) and Inuit Tapiriit Kanatami (ITK) to develop funding proposals on cultural competence and retention of aboriginal nursing students in educational programs. ▪ Partnered with CNA, CNF, ACEN, and CARNA to form the Nursing Research Consortium – CASN is the secretariat. ▪ Partnered with Canadian Virtual Hospice to create an educational resource in the area of Palliative Care. ▪ Partnered with Canadian Patient Safety Institute to identify links in accreditation standards and patient safety competencies. <p>CASN actively participated in / was represented at the following stakeholder meetings/projects:</p> <ul style="list-style-type: none"> ▪ Global Nursing Leadership Reference Group ▪ Community Health Nurses of Canada ▪ GANES – meeting in Washington, December 2010 and numerous teleconferences ▪ AIPHE Steering Committee (Accreditation of Interprofessional Health Education) ▪ Nursing Reference Group (Canada Health Infoway) ▪ Health Canada Task Force on Internationally Educated Nurses ▪ Regular meetings with representatives from CAN, CNF, and ONP ▪ Annual Conference for Educators of Internationally Educated Nurses ▪ Association of Family Medicine ▪ Physiotherapy Association ▪ PHSC Meetings ▪ Research Canada Annual General Assembly ▪ Association of Accrediting Agencies of Canada (AAAC) meeting
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			<ul style="list-style-type: none"> ▪ National Smoking Cessation Steering Committee (completed March 2011) ▪ RNAO Invitational Think Tank Presentation ▪ Canadian Hospice Palliative Care Conference Presentation ▪ Parliamentary Health Research Caucus Reception ▪ National Advisory Meeting (A.N.A.C) ▪ ARCASN Conference ▪ COUPN/CAATS Meeting ▪ Joint Position Statement Meeting (CNA) ▪ CIHR funded meeting on cultural, pedagogy and practice ▪ Canada Health Infoway - Nursing Reference Group Face-to-Face Meeting ▪ Think Tank on the Effective Workforce Integration of Internationally Educated Nurses ▪ CIFI Advisory Committee <p><u>Membership Support</u></p> <ul style="list-style-type: none"> ▪ Support of a Working Group of the Education Committee in developing a draft document on Guidelines for Linking Competency Development and Accreditation Standards. ▪ Support of the Public Health Committee in integrating clinical competencies in accreditation documents, in conducting a survey to identify gaps between clinical performance expectations in public health of new graduates and performance of new graduates, widespread dissemination of guidelines for public health clinical experiences. ▪ Pretesting questions on the joint CASN-CNA national survey to increase reliability and validity. ▪ Supported the work of the Nursing Academic Leadership Conference planning committee.
	<p>1.2 Participate in, and shape decisions affecting nursing education 1.2 Être partie aux décisions visant l'enseignement des sciences infirmières et aider à les mettre au point</p>	Ongoing	<ul style="list-style-type: none"> ▪ Chaired the CASN Nursing Academic Leadership Conference planning committee and supported the coordination of the Conference. ▪ Invited Patricia Benner to present at CASN council in November 2011. ▪ Invited Past-President of American Association of Colleges of Nursing to present at the Graduate Forum in November 2010 on the practice doctorate in the United States in order to advance the discussion on the doctoral position statement revision. ▪ Health Canada funding obtained for a) implementation of Palliative Care b) Internationally Educated Nurses. Both projects contribute to CASN's mission to promote quality education. ▪ CASN commentary on NP and Clinical Nurse

			<ul style="list-style-type: none"> ▪ Specialist education published in peer review journal. ▪ Two articles published in peer reviewed journal on CASN projects with CASN office support (palliative care, public health). ▪ Canada Health Infoway funding obtained for a two year project on promoting nursing informatics in nursing education- successful. ▪ Proposal submitted to Canada Health Infoway for a two year project on promoting nursing informatics in nursing education- successful. ▪ A Stakeholder Forum on Palliative Care was held in March as part of a palliative care project. ▪ A Stakeholder Forum on IEN Education was held in November as part of a IEN education project. ▪ Creation and support of a Task Force on NP Education to develop the CASN position statement on NP education and draft essential components of NP Education and collaborate with CNA on NP Education, towards the overall goal of developing a national consensus on NP education. ▪ Environmental scan on NP education completed. ▪ A Nurse Practitioner Forum organized by CASN's NP Forum Planning Committee was held in September 2011 to work on the development of national consensus-based guiding principles and essential components of Nurse Practitioner education. ▪ Environmental scan and literature review of bridging programs was completed to aid in the creation of a National Framework of Best Practices in Bridging Education (ongoing). ▪ Creation and support of a Political Advocacy Ad Hoc Committee to position CASN to be proactive in the renegotiation of Canada Health Act in 2014. ▪ The Nursing Research Consortium is developing a Strategic Plan, which will include a position on nursing education research.
	<p>1.3 Ensure budget/resource to support the work with stakeholders 1.3 Obtenir le budget et les ressources nécessaires au travail avec les parties intéressées</p>	Ongoing	<ul style="list-style-type: none"> ▪ Public Health subcommittee project disseminating previous work obtained one year funding from Public Health Canada- completed. ▪ The IEN Project is in the second of a four year project funded by Health Canada. ▪ Two and a half year funding obtained for Infoway project. ▪ Six-month funding anticipated for cultural competence work from Health Canada's AHHRI project. ▪ CASN Sub-Committee on Public Health obtained three years of funding from PHAC. Project completed in March 2011. ▪ The IEN Project is in the second of a two year project

			funded by Health Canada – scheduled for completion 2012. <ul style="list-style-type: none"> ▪ The Palliative Care Project is in the second year of a two year project funded by Health Canada – scheduled for completion 2012. ▪ Two and a half year funding obtained for Infoway project.
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Outcome #2 Schools and stakeholders access a bilingual, national repository of relevant and current information/data (clearinghouse) Résultat 2 Les écoles et les parties intéressées ont accès à un référentiel pancanadien bilingue d'information et de données récentes et pertinentes (centre de documentation)	2.1 Develop position/policy statements bilingually and disseminate to the internal and external stakeholders	Ongoing	<ul style="list-style-type: none"> ▪ Creation of the CASN Position Statement on the Education of Registered Nurses in Canada. ▪ Revision of the Baccalaureate Position Statement. ▪ Nursing Education in Canada Statistics 2008-2009 Registered Nurse Workforce, Canadian Production: Potential New Supply Report published and disseminated. (December 2010) ▪ In the process of reviewing the status of NP education for nursing students across Canada by surveying CASN member schools.
	<p>2.1 Préparer des énoncés de position et de politique dans les deux langues officielles et les diffuser aux parties intéressées aussi bien internes qu'externes</p> <p>2.2 Compile, maintain and disseminate relevant, accurate, current information, promising practices</p> <p>2.2 Recueillir, tenir à jour et diffuser de l'information pertinente, exacte et actuelle, notamment au sujet des pratiques prometteuses</p>	Ongoing	<ul style="list-style-type: none"> ▪ Website development and updates. ▪ Cultural competence and cultural safety survey disseminated.

Outcome #3 Regions contribute to and use CASN resources to address issues and opportunities and influence decisions in their jurisdictions Résultat 3 Les régions contribuent aux ressources de l'ACESI et y recourent pour étudier des questions, profiter d'occasions et influer sur les décisions relatives à leur territoire	3.1 Compile, maintain and disseminate relevant, accurate, current information, promising practices	Ongoing	<ul style="list-style-type: none"> ▪ Publication of the Nursing Education in Canada Statistics 2008-2009 Registered Nurse Workforce, Canadian Production: Potential New Supply Report in December 2010. This document is a key resource for schools in regards to self-study and in terms of negotiating funding. ▪ Environmental scan of teaching and learning resources for palliative and end of life care – posted on website – negotiations underway to post it on the Virtual Hospice website as well with links to CASN. ▪ Two presentations at ICN on CASN work in May, 2011 in Malta (one related to faculty projections based
	<p>3.1 Recueillir, tenir à jour et diffuser de l'information pertinente, exacte et actuelle, notamment au sujet des pratiques prometteuses</p>		

			<p>on the nation student and faculty survey carried out with CNA, and one related to the CARICOM project completed in March 2011).</p> <ul style="list-style-type: none"> ▪ Infoway project Task Force assembled to include representatives from all CASN regions to engage them in the discussion on resources and competencies for nursing informatics. ▪ Environmental Scan of IEN programs developed and a literature review of best practices in IEN bridging to develop a National Framework of Guiding Principles and Essential Components for bridging education. ▪ Environmental scan of teaching and learning resources in the area of nursing informatics for the CASN-Infoway project. ▪ Environmental scan of Nurse Practitioner programs was completed to inform the September 2011 NP Forum as well as the Graduate Studies and NP Educators Forum November 2011.
	<p>3.2 Provide clear, user-friendly communication mechanisms among regions, CASN, schools and individual faculty members</p> <p>3.2 Fournir des mécanismes clairs et conviviaux de communication entre les régions, l'ACESI, les écoles et les membres du personnel enseignant</p>	Ongoing	<ul style="list-style-type: none"> ▪ CASN provides online discussion forums for a variety of internal as well as external stakeholder groups and will be providing access to new discussion forums to several new groups within the next 6 months. ▪ Publication of monthly CASN News Update incorporating information from stakeholders and members. ▪ CASN website provides space for membership to post news updates, announcements and requests. CASN also provides media updates as well as information regarding advocacy activities on our website. ▪ Use of Skype and teleconferencing to facilitate group meetings as well as individual communication. Exploring possible options for communication during meetings, which may include video. ▪ CASN's Task Force on Governance met on January 31 and February 1, 2011 to discuss bylaw review.
	<p>3.3 Develop and provide bilingual tools for advocacy</p> <p>3.3 Concevoir et fournir des outils de plaidoyer bilingues</p>	Ongoing	<ul style="list-style-type: none"> ▪ Documents which are disseminated are translated, with the exception of projects that have been a result of collaboration with other organizations.
	<p>3.4 CASN encourages Regions to contribute to and use the national repository</p> <p>3.4 Inciter les régions à contribuer au référentiel pancanadien et à le consulter</p>	Ongoing	<ul style="list-style-type: none"> ▪ President Elect attended WRCASN meetings, ED to meet with COUPN/CAATS in May, and attended the ARCASN annual meeting and conference in June.

	<p>3.5 Revise the webpage and open a media section</p> <p>3.5 Refondre le site Web et y créer une section destinée aux médias</p>	Complete	<ul style="list-style-type: none"> ▪ Bimonthly reviews of the website are currently being implemented. ▪ Media Section improvements continue. ▪ Update website on CASN Initiatives and Projects. ▪ CASN has developed a Facebook page that is linked with the CASN website which will increase visibility.
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Outcomes	Outputs	Timeline	Status / Progress Report
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Strategic Priority B – Guide excellence in nursing education through accreditation Priorité B : Gérer l'excellence dans l'enseignement des sciences infirmières grâce à l'agrément

Outcome #1 Stakeholders recognize the CASN accreditation process as the approval mechanism for nursing education programs in Canada Résultat 1 Les parties intéressées reconnaissent dans le processus d'agrément de l'ACESI le mécanisme d'approbation des programmes canadiens d'enseignement des sciences infirmières	1.1 Identify key stakeholders and initiate conversations, eg., regulatory bodies, ACEN, CNA	Medium	<ul style="list-style-type: none"> ▪ Negotiations for the renewal of the joint program approval/accreditation agreement with the College of Registered Nurses of Nova Scotia are underway. ▪ Regulatory body representatives observed CASN Accreditation Board meetings and provided advice regarding how to create efficiencies. ▪ Possible partnership with Ontario Telemedicine Network (OTN) is under consideration for the Infoway Project.
	<p>1.1 Reconnaître les principales parties intéressées afin d'engager des échanges (p. ex., organismes de réglementation, ACEN, AIIC)</p> <p>1.2 Provide a proposal/concept document that introduces the options, their importance, value-add and cost, so that it elicits a response</p> <p>1.2 Fournir une proposition ou un document conceptuel exposant les possibilités, leur importance respective, leur valeur ajoutée et les coûts qui leur sont associés de manière à susciter des réactions</p>	Medium	<ul style="list-style-type: none"> ▪ Draft document being developed.

Outcome #2 The accreditation process improves continuously Résultat 2 Le processus d'agrément s'améliore constamment	2.1 Continue to streamline processes (Task Force on Accreditation)	Ongoing	<ul style="list-style-type: none"> ▪ The CASN Accreditation Ad Hoc Committee has been examining issues related to the definition of what a program is and the relationship of Educational Units and Educational Programs in Collaborative Partnerships is. They report to the CASN Board of Directors. The members have already had several teleconferences and held two successful in-person meetings. Other teleconferences and in-person meetings have been scheduled for the
	2.1 Continuer de rationaliser les processus (Groupe de travail sur l'agrément)		

			<ul style="list-style-type: none"> ▪ future. <p>▪ Indicators are being piloted in order to track response rates to e-mails and other inquiries to ensure a high level of operational responsiveness.</p>
	<p>2.2 Allocate resources to accreditation upgrading and renewal of computer support programs and systems</p> <p>2.2 Attribuer des ressources à la mise à niveau et au remplacement des logiciels et du matériel informatique utilisés pour le processus d'agrément</p>	Medium	<ul style="list-style-type: none"> ▪ CASN Accreditation is continuing its efforts to becomes paperless. ▪ Online discussion forum for CAB has been improved and is being utilized regularly. ▪ Standardized accreditation decision letters continue to be utilized to ensure clarity and consistency. ▪ A three session orientation program for new reviewers was developed and offered to four groups of reviewers. ▪ The CASN Accreditation Program is being revised to be more clear and concise and CASN is planning to involve the francophone community in the translation. ▪ A streamlined and secure process for filing, maintenance and backup of accreditation documents is being utilized.
	<p>2.3 Explore “promising practices”</p> <p>2.3 Examiner les pratiques prometteuses</p>	Ongoing	<ul style="list-style-type: none"> ▪ The CASN Accreditation Ad Hoc Committee continues to investigate and recommend promising practices for the continuous quality improvement of the CASN Accreditation Program.

Outcome #3 All current Canadian eligible programs in nursing have access to accreditation Résultat 3 En sciences infirmières, tous les programmes canadiens actuels admissibles ont accès à l'agrément	<p>3.1 Delineate enablers and barriers to achieve outcome #3</p> <p>3.1 Définir les agents de facilitation et les obstacles à l'atteinte du résultat 3</p>	Medium	<ul style="list-style-type: none"> ▪ A plan to reach non-accredited schools is being developed. ▪ A symposium on Scholarship is being planned for May of 2012 in order to assist schools to enhance their programs.
	<p>3.2 Explore eligibility criteria for accreditation and look for opportunities to expand, including continuing education</p> <p>3.2 Étudier les critères d'admissibilité à l'agrément et chercher des occasions d'étendre leur application, y compris à la formation continue</p>	Medium	<ul style="list-style-type: none"> ▪ CASN is exploring the possibility of expanding accreditation to include Master's entry to practice programs and advanced practice programs with a focus on the NP community.
	<p>3.3 Convene a table of key stakeholders, regulatory bodies to discuss:</p>	Medium	<ul style="list-style-type: none"> ▪ CASN participated on a working group with AIPHE to integrate standards on IPE within the accreditation

	<ul style="list-style-type: none"> - a unified voice for the categories/groups of nursing education programs - a systemic view of nursing education - access to baccalaureate education <p>3.3 Réunir un groupe formé de personnes intéressées et de représentantes et représentants des principaux organismes de réglementation afin de discuter des sujets suivants :</p> <ul style="list-style-type: none"> • porte parole unique pour les catégories et groupes de programmes d'enseignement des sciences infirmières • perspective systémique de l'enseignement des sciences infirmières accès à la formation universitaire de premier cycle 		<p>program. The standards have been developed and are being discussed at various venues with the recommendations from other groups.</p>
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<p>Outcome #4 Other non-baccalaureate nursing programs in Canada may access accreditation</p> <p>Résultat 4 Les programmes canadiens de sciences infirmières ne menant pas à un baccalauréat peuvent obtenir l'agrément</p>	<p>4.1 Delineate issues and processes</p> <p>4.1 Définir les enjeux et les processus</p>	Long	<ul style="list-style-type: none"> ▪ See 3.2
	<p>4.2 Explore eligibility criteria for accreditation and look for opportunities to expand</p> <p>4.2 Examiner les critères d'admissibilité à l'agrément et trouver des moyens de les étendre</p>	Long	<ul style="list-style-type: none"> ▪ See 3.2

<p>Outcome #5 Up to three international nursing programs have access to accreditation</p> <p>Résultat 5 Jusqu'à trois programmes de sciences infirmières donnés à l'étranger peuvent obtenir l'agrément</p>	<p>5.1 Build on existing work done to explore opportunities</p> <p>5.1 Tirer profit du travail déjà accompli afin d'envisager les possibilités</p>	Ongoing	<ul style="list-style-type: none"> ▪ University of Calgary-Qatar successfully completed an accreditation review. ▪ An Accreditation review of a school of nursing in Australia is currently underway. An on-site review of a baccalaureate nursing program in Australia took place in September ahead of the original November timeline.

	<p>5.2 Explore the development of a consultation service, provided by CASN, to get schools ready for an accreditation review</p> <p>5.2 Examiner la possibilité de créer un service consultatif fourni par l'ACESI afin de préparer les écoles à leur examen d'agrément</p>	Medium	<p>National:</p> <ul style="list-style-type: none"> ▪ A webinar session is currently being developed to assist schools in preparing for Accreditation. <p>International:</p> <ul style="list-style-type: none"> ▪ CASN has been in discussions with a program of nursing in Africa and another in the Caribbean regarding consultation services.
	<p>5.3 Explore the fit of international accreditation with the Canadian Registered Nurse Exam (CRNE) and Canadian regulatory bodies</p> <p>5.3 Étudier comment l'agrément d'établissements à l'étranger pourrait cadrer avec l'Examen d'autorisation infirmière au Canada (EAIC) et les organismes de réglementation canadiens</p>	Medium	<ul style="list-style-type: none"> ▪ Dialogue is underway with regulatory bodies.

Outcomes	Outputs	Timeline	Status / Progress Report

Priority C: Strengthen the standards of excellence for nursing education through research and scholarship

Priorité C : Resserrer les normes d'excellence pour l'enseignement des sciences infirmières par l'entremise de la recherche et de l'avancement des connaissances

<p>Outcome #1 A National Chair in nursing education is funded and established by 2011</p> <p>Résultat 1 Une chaire de recherche en enseignement des sciences infirmières est créée et subventionnée au plus tard en 2011</p>	<p>1.1 Provide a framework for advocating for nursing education research.</p> <p>1.1 Fournir un cadre de travail afin de plaider en faveur de la recherche en enseignement des sciences infirmières</p>	Long	<ul style="list-style-type: none"> ▪ Development of an online journal. decision is pending further discussion and a review of the financial feasibility of the project. ▪ A revised signed Nursing Research Consortium has been created (MOU signed) and a Strategic Plan is being developed. ▪ Executive Director as representative of CASN sits on: <ul style="list-style-type: none"> a) the Advisory Committee of the following research groups: <ul style="list-style-type: none"> ○ CIFI (Centre d'innovation en formation infirmière) at the University of Montreal. ○ RNAO National Nursing Best Practice Smoking Cessation Initiative. ○ Enhancing internationally educated nurses' language competencies: Fair and effective systems change through York University. ▪ The inaugural CASN Dr. Pat L. Griffin Nursing Education Research Scholar was awarded to Florence Myrick from the University of Alberta to
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			<ul style="list-style-type: none"> ▪ support her research in education, through inquiry, mentorship, and dissemination. ▪ CASN, as part of the Nursing Research Consortium, continues to participate in Research Canada.
	<p>1.2 Explore and investigate fund development – persons, practices, successes</p> <p>1.2 Chercher des moyens d'accroître les fonds affectés à la recherche – personnes, pratiques, réussites</p>	Ongoing	<ul style="list-style-type: none"> ▪ Fundraising for the Pat Griffin fund was carried out at Council 2010 and is planned for Council 2011.
	<p>1.3 Talk to those who have been most influential in attracting chairs regarding successes, best practices</p> <p>1.3 S'adresser aux personnes dont l'influence a contribué à l'établissement de chaires pour comprendre leurs facteurs de réussite et leurs pratiques exemplaires</p>	Complete	
	<p>1.4 Use GANES to identify research priorities to “frame” the research chair, e.g., international impact</p> <p>1.4 Recourir à la GANES pour formuler des priorités de recherche permettant de « circonscrire » la chaire (p. ex., retombées sur la scène internationale)</p>	Medium	<ul style="list-style-type: none"> ▪ Exploring international minimum data set to facilitate future action.

Outcome #2 Nursing education curriculum influences health system and practice re-design Résultat 2 Le programme d'enseignement en sciences infirmières influe sur la refonte du système et des pratiques de soins de santé	<p>2.1 Follow up to the Nursing Education Summit</p> <p>2.1 Assurer le suivi du Sommet sur l'enseignement des sciences infirmières</p> <p>2.2 Reinforce a process where nursing research informs curriculum and accreditation standards (curriculum is more visionary than responsive); where possible develop indicators, Develop a process for integration of competencies (safety, informatics, palliative care, public health) into Accreditation</p> <p>2.2 Mettre de l'avant un processus selon lequel</p>	<p>Complete</p> <p>Ongoing</p>	<ul style="list-style-type: none"> ▪ Complete August 2010. ▪ Working Group is developing a template for the integration of competencies into the CASN accreditation program. ▪ The ad hoc Accreditation Committee examined the question of how the Public Health and Accreditation of Interprofessional Health Education standards into the CASN Accreditation Program that have been developed might be integrated into current standards. ▪ Collaboration between the accreditation advisory
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	<p>les programmes d'enseignement et les normes d'agrément se fondent sur la recherche infirmière (le programme devient plus visionnaire que réactif) et, si possible, concevoir des indicateurs</p> <p>Élaborer un processus d'intégration des compétences (sécurité, informatique, soins palliatifs, santé publique) à l'agrément</p>		<p>committee and the education committee is being initiated.</p>
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<p>Outcome #3 Key discoveries address important and emerging nursing practice and nursing education issues</p> <p>Résultat 3 Des découvertes majeures répondent à des questions prioritaires et nouvelles relativement à l'exercice de la profession infirmière et à l'enseignement des sciences infirmières</p>	<p>3.1 Transfer/disseminate existing work of the consortium (or related activities) that identifies research priorities</p>	Complete	<ul style="list-style-type: none"> ▪ Nursing research is identified as one of the three priorities in the White Paper. ▪ Nursing Research Consortium held a consultation meeting with the Canadian Academy of Health Sciences fellows in September 2011 regarding strategic priorities.
	<p>3.1 Faire circuler et diffuser les travaux du regroupement (ou les activités connexes) qui déterminent des priorités de recherche</p>	Complete (consider updated mandate)	<ul style="list-style-type: none"> ▪ RESEARCH INVENTORY HAS BEEN INACTIVE SINCE THE DATA BASE FUNDING ENDED (APPROX 6 YRS AGO)
	<p>3.2 Use research priorities to establish framework for the research inventory clearinghouse</p>	Complete (consider updated mandate)	<ul style="list-style-type: none"> ▪ RESEARCH INVENTORY HAS BEEN INACTIVE SINCE THE DATA BASE FUNDING ENDED (APPROX 6 YRS AGO)
	<p>3.3 Research and Scholarship Committee analyzes consortium priorities and identifies implications/actions for nursing education in academic settings (think tanks, bold strategies for building and sustaining research and scholarship capacity, mentorship training models, tools to navigate the research and scholarship maze)</p> <p>3.3 Faire analyser les priorités du regroupement par le Comité de la recherche et de l'avancement des connaissances afin de déterminer leurs retombées et les suivis à effectuer sur l'enseignement des sciences infirmières en milieu universitaire (laboratoires d'idées, stratégies audacieuses d'établissement et de maintien de la capacité de recherche, modèles de formation par le mentorat, outils de navigation dans le labyrinthe de la recherche)</p>	Ongoing	<ul style="list-style-type: none"> ▪ Research and Scholarship Committee has updated its terms of reference and contributes actively to the Nursing Research Consortium.

Outcomes	Outputs	Timeline	Status / Progress Report
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Priority D: Optimize nursing education resources including student, faculty and fiscal.
Priorité D : Optimiser les ressources étudiantes, enseignantes et financières pour l'enseignement des sciences infirmières

Outcome #1 Schools use promising practices and planning tools to optimize faculty recruitment, retention and development Résultat 1 Les écoles emploient des pratiques et des outils de planification prometteurs afin d'optimiser le recrutement, le maintien en poste et le perfectionnement professionnel du personnel enseignant	1.1 Develop a framework to optimize faculty recruitment, retention and development 1.1 Élaborer un cadre de travail afin d'optimiser le recrutement, le maintien en poste et le perfectionnement professionnel du personnel enseignant	Medium	<ul style="list-style-type: none"> ▪ Analysis of Student Faculty Survey Data has been conducted with resulting recommendations which were presented at ICN in May 2011.
	1.2 Collect what members have done to facilitate and optimize faculty recruitment, retention and development 1.2 Recenser les initiatives prises par les membres pour faciliter et optimiser le recrutement, le maintien en poste et le perfectionnement professionnel du personnel enseignant	Complete	<ul style="list-style-type: none"> ▪ The Student and Faculty Survey tracks not only the precise number of retirement and attrition for other reasons but also asks that the schools identify what retention and recruitment issues they have. This data has been included in the final report for the past two years.
	1.3 Develop a list of promising strategies to optimize faculty recruitment, retention and development 1.3 Dresser une liste de stratégies prometteuses pour optimiser le recrutement, le maintien en poste et le perfectionnement professionnel du personnel enseignant	Medium	
	1.4 Apply Health Human Resource modeling practices and research to build faculty capacity 1.4 Mettre en application les pratiques et les conclusions de recherche du modèle de ressources humaines en santé afin de renforcer les capacités du personnel enseignant	Long	<ul style="list-style-type: none"> ▪ Environmental Scan of Nurse Practitioner programs conducted. ▪ Analysis of National Survey Data carried out with recommendations.

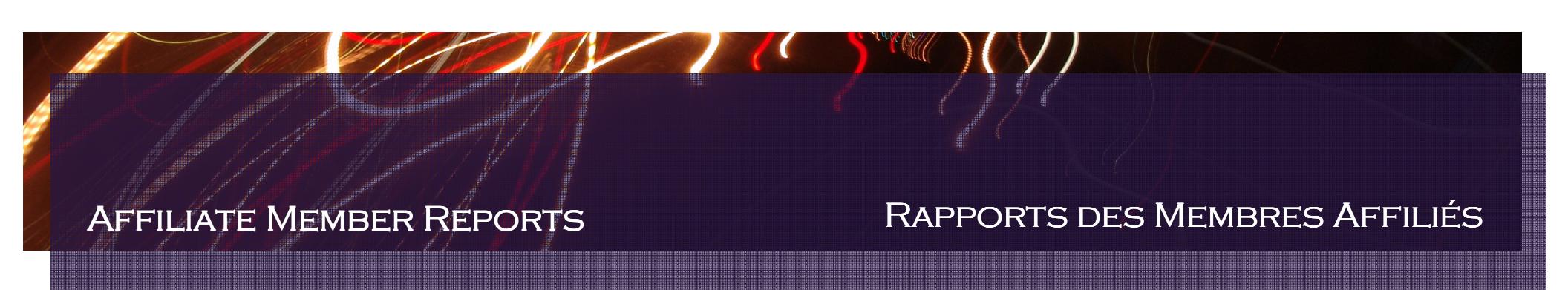
<p>Outcome #2 Schools use CASN tools for addressing student retention</p> <p>Résultat 2 Les écoles utilisent les outils de l'ACESI afin de préserver leur effectif étudiant</p>	<p>2.1 Develop a tool/framework for Schools of Nursing to use individually to analyze retention/attrition issues</p> <p>2.1 Concevoir un outil ou un cadre de travail que chaque école de sciences infirmières peut utiliser pour analyser sa situation à l'égard de la préservation ou de la déperdition de son effectif scolaire</p>	<p>Complete (Phase 2 being discussed)</p>	<ul style="list-style-type: none"> ▪ This tool was developed. (2007) ▪ A discussion with CNA regarding the feasibility of measuring attrition is being examined. ▪ New questions in regards to faculty were developed and include in the 2008-2009 Student and Faculty Survey including questions specifically regarding faculty recruitment and retention. ▪ A proposal on the topic of Aboriginal student retention is being explored for submission to the Aboriginal Health Human Resources Initiative in collaboration with several external partners.
	<p>2.2 Provide a framework to analyze nursing retention issues in the larger post-secondary education context</p> <p>2.2 Fournir un cadre de travail afin d'analyser les questions de préservation des effectifs en sciences infirmières dans le contexte plus vaste de l'éducation postsecondaire</p>	<p>Long</p>	<ul style="list-style-type: none"> ▪ PENDING

<p>Outcome #3 Schools contribute to and access CASN's repository of promising practices and funding strategies</p> <p>Résultat 3 Les écoles alimentent et consultent le référentiel de l'ACESI sur les pratiques prometteuses et les stratégies de financement</p>	<p>3.1 CASN articulates the cost of nursing education in fiscal terms</p> <p>3.1 Exposer le coût de la formation infirmière dans une perspective financière</p>	<p>Long</p>	<ul style="list-style-type: none"> ▪ Complete
	<p>3.2 Identify the resources needed to move forward the Canadian Nursing Education agenda</p> <p>3.2 Déterminer les ressources nécessaires pour faire progresser le dossier de l'enseignement des sciences infirmières au Canada</p>	<p>Long</p>	<ul style="list-style-type: none"> ▪ In progress- Report provided to NDP health critic (March 2011).
	<p>3.3 Secure funding to explore education resources allocation</p> <p>3.3 Obtenir du financement afin d'examiner la répartition des ressources en éducation</p>	<p>Long</p>	<ul style="list-style-type: none"> ▪ Complete- White Paper

	<p>3.4 Determine the cost of educating a baccalaureate prepared registered nurse</p> <p>3.4 Établir ce que coûte la formation d'une infirmière autorisée bachelière</p>	Long	<ul style="list-style-type: none"> ▪ See 3.1
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Glossary
ACEN = Academy of Canadian Executive Nurses
CARNA = College & Association of Registered Nurses of Alberta
CASN = Canadian Association of Schools of Nursing
CNA = Canadian Nurses Association
NANB = Nurses Association of New Brunswick
NEPAB = Nurses Education Program Approval Board
SRNA = Saskatchewan Registered Nurses' Association
WHO = World Health Organization
WRCASN = Western Region CASN

Timelines	
Medium	6-18 months
Long	18-36 months
Complete	
Ongoing	Output is part of the ongoing mandate of CASN



AFFILIATE MEMBER REPORTS

RAPPORTS DES MEMBRES AFFILIÉS



ARCASN PRESIDENT'S REPORT 2010 - 2011

ARCASN PRESIDENT'S REPORT 2010-2011

ARCASN's executive met four times this past year. The first meeting was in May 2010 at the Annual General Meeting held in St. John's, NL. On September 24th, 2010 we had a one day meeting at Dalhousie University in Halifax, NS and on February 8th, 2011 the executive met via teleconference. Our spring meeting was held on June 17th, 2011 during the AGM at St. Francis Xavier University in Antigonish, NS.

The 2011 Nursing Research Conference, *Articulating the Unique Value of Nursing*, was held at St. Francis Xavier University in Antigonish, NS. The plenary speakers were Marlene Smadu and Suzanne Gordon. Special thanks to Donna Beiswanger, the Conference Chair, and her team for an excellent job. Next year the ARCASN AGM will be held in Halifax, NS and hosted by Dalhousie University.

At the AGM Professor Ellen MacFarlane from St. Francis Xavier University gave a presentation on the new Model of Care and raised concern about erosion of the nurse's role. Professor MacFarlane encouraged nurse educators to demand an adequate number of RNs at the bedside. This topic created a great deal of discussion and educators raised their concerns about patient safety and the role of the RN in protecting and ensuring quality patient care. ARCASN is encouraging members to write their professional association, union, municipal, provincial and/or national representatives to give this issue a voice.

Over the past year, the executive has worked hard to increase ARCASN's profile with several members sitting on national task forces, the CRNE Exam Committee and its sub-committees. This past year ARCASN's executive has continued to pursue the activities outlined in our strategic plan. We continue to meet our mission and reflect the changing needs in our region. We endeavour to provide members information in both languages and in January 2011 the Constitution and Bylaw documents were translated into French and are available on ARCASN's website.

To celebrate excellence in nursing education and nursing research and to recognize outstanding contributions and achievements, ARCASN was pleased to acknowledge the following 2011 award recipients.

Education Innovation Awards:

Peggy Colbourne and Erica Hurley: Western Regional School of Nursing, Corner Brook, NL. "Developing and Integrating Simulated Clinical Learning (SCL) Using High Fidelity Manikins into Undergraduate Pediatric Nursing Curricula."

Dr. Suzanne Harrison and Dr. Suzanne Dupuis-Blanchard: University of Moncton, Moncton, New Brunswick. "S.I.M.P.L.E.: Making an Innovative Mediatized Tool Even Better."

Research Awards:

Cynthia Brown: Memorial University. St. John's, NL "Assessing the Impact of a High-fidelity Simulated Interprofessional Clinical Experience on the Attitudes, Collaboration and Teamwork of Health Sciences Students: A Pilot Study."

Kathryn Weaver: University of New Brunswick, Fredericton, NB. "Health Professional's Perspectives of Eating Disorders across Atlantic Canada."

Special Thanks

We would like to take the opportunity to thank all who participated at the AGM and research conference held in Nova Scotia and the Deans and Directors for their ongoing support of ARCASN and its activities. We also would like to acknowledge the support from the Executive and the school representatives of the ARCASN's executive committee. A very special thanks to every nursing educator for their support and collaboration in preparing nurses with the education and experience to provide quality care for all.

Respectfully submitted
Creina Twomey, ARCASN President

The Executive committee members include:

President: Creina Twomey, Memorial University of Newfoundland

President Elect: Audrey Walsh, Cape Breton University

Treasurer: Glenda Cunning, Western Region School of Nursing

Secretary: Doreen Dawe, Memorial University of Newfoundland.

QRCASN PRESIDENT'S REPORT 2010-2011

INSTANCES DE GOUVERNE :

En 2010-2011, l'Assemblée générale annuelle s'est tenue le 8 novembre 2010. Les membres du Conseil d'administration de l'ACÉSI-RQ se sont rencontrés deux fois, soit le 8 novembre 2010, dans le cadre du Congrès annuel de l'Ordre des infirmières et infirmiers du Québec (OIIQ) à Montréal, et le 2 mai 2011, dans le cadre de la Conférence sur le leadership dans l'enseignement de l'ACÉSI à Québec. Les membres du comité exécutif se sont réunis le 12 octobre 2010 et le 11 avril 2011.

Membre du comité exécutif 2010-2011

Johanne Goudreau, Université de Montréal, présidente
Linda Lepage, Université Laval, secrétaire
Luc Mathieu, conseiller

Chantal St-Pierre, Université du Québec en Outaouais, vice-présidente
Marcia Beaulieu, Université McGill, trésorière

1. RAPPORT ANNUEL 2010-2011

Par courriel en septembre 2011, la présidente Mme Johanne Goudreau a déposé le tableau suivant qui présente les objectifs de l'année 2010-2011 adoptés par les membres le 8 novembre 2010 et, en caractère italique, les activités effectuées.

Objectifs	Activités
1 Se préoccuper des défis et enjeux de la formation universitaire dans le contexte actuel de la main-d'œuvre infirmière au Québec et mener des activités de promotion de la formation universitaire	1.1 <i>Participation et suivi des travaux de la Table sectorielle nationale en sciences infirmières des RUIS.</i> 1.2 <i>Entretien des échanges avec le Comité jeunesse de l'OIIQ qui, entre autres, milite en faveur du DEC-Bac, afin de connaître leurs perceptions des retombées de leurs actions ainsi que des problématiques, défis, enjeux.</i> 1.3 En concertation avec le Forum des DD qui en décembre recevra la recension des écrits internationaux sur la valeur ajoutée de la formation universitaire, mettre sur pied un comité de travail qui aura pour mandat d'établir un plan d'action appuyé de plaidoyers en faveur de la formation universitaire. 1.4 <i>Suivre les travaux du SIDIEF qui développe un argumentaire sur la formation universitaire pour 2012 et établir des échanges au besoin.</i>
2 Consolider la structure de l'ACÉSI, région du Québec, en lien avec la structure de l'Association nationale et partenariats à établir	2.1 <i>Encourager la participation au Leadership in Education de 2011 qui se tiendra à Québec.</i> 2.2 <i>Maintenir les actions en vue d'obtenir de l'ACÉSI les documents sur l'accréditation dans un français respectable et présentant une meilleure consistance interne, tant en version anglaise que française.</i>
3 Assurer le suivi du dossier des bourses pour la formation de la relève du corps professoral des universités québécoises	3.1 <i>Participation à la Table de la CREPUQ sur les bourses.</i> 3.2 <i>Participation au comité scientifique de la FRESIQ pour évaluation des candidatures.</i> 3.3 <i>En collaboration avec la FRESIQ, établir un bilan et des projections jusqu'à la fin du programme.</i> 3.4 <i>Procéder à la mise à jour de notre banque de données sur le corps professoral et l'équipe enseignante de chaque université.</i>
4 Assurer un meilleur partenariat avec le ministère de la santé et des services sociaux et l'OIIQ relativement au déploiement des programmes IPS.	4.1 Poursuivre nos plaidoyers auprès du MSSS en faveur de la valorisation du déploiement des IPS autres qu'IPS et de l'élaboration d'un plan des effectifs requis. <i>Poursuivre la participation active à la Table sectorielle nationale en sciences infirmières des RUIS</i>
5 Poursuivre les actions en vue d'obtenir les ressources humaines, matérielles et financières nécessaires au maintien et au développement de la formation universitaire des infirmières.	5.1 <i>Suivre le financement des programmes IPS et intervenir auprès du MSSS et du MELS au besoin</i> 5.2 Travailier avec le MELS et le MSSS sur l'évaluation des coûts des programmes IPS, autres qu'IPS, à maintenir, à relancer ou à élaborer et mettre en œuvre 5.3 Appuyer la Table de concertation en sciences infirmières de la CREPUQ dans ses démarches en vue d'obtenir une enveloppe spécifique pour le financement des stages de 1 ^{er} cycle.
6 Mettre en place les conditions de réalisation de la formation de l'infirmière clinicienne en soins spécialisés, de l'infirmière praticienne et de l'infirmière cadre conseil	6.1 <i>Maintenir les rencontres du Forum sur la pratique avancée.</i> 6.2 Acheminer au MSSS une lettre demandant la reconnaissance du niveau de formation de maîtrise requis pour l'ICS en santé mentale 6.3 Poursuivre le développement d'un programme en consortium sur la spécialité den santé mentale quand le MSSS aura confirmé qu'il reconnaît le niveau de formation de maître pour l'intégration dans la pratique.
7 Identifier des stratégies visant le renforcement du caractère intégré de la formation infirmière intégrée FII (DEC/Bacc).	7.1 <i>Suivre les travaux du projet de recherche pour évaluer le programme DEC-BAC intitulé : Projet provincial des consortiums collèges-universités impliqués dans les programmes de formation infirmière intégrée DEC-BAC – État des lieux sur la Phase 1 du continuum de formation infirmière intégrée DEC-BAC (2001-2008) et développement d'un plan d'action provincial pour une Phase II (2010-2015).</i> 7.2 <i>Interroger le Forum sur la FII en fonction de l'évolution du projet dont les résultats sont attendus en A2011.</i>
8 Identifier des stratégies et plaidoyers à développer pour participer de façon stratégique à la valorisation et au développement de la recherche et de son financement.	8.1 Poursuite de la participation des universités au Centre FERASI, GRISIQQ et FRESIQ. 8.2 <i>Procéder à la mise en place d'un comité qui va examiner la pertinence de créer un Forum en recherche, entre autres en précisant nos préoccupations pour la relève de nouveaux chercheurs et en élaborant un projet de mandat pour ce Forum.</i>

2. ÉVÉNEMENTS SPÉCIAUX

Prix Reconnaissance et Prix Hommage

Le Prix Hommage a été remis le 8 novembre 2010 à la Professeure Céleste Johnson pour sa carrière en recherche et son impact sur le développement et la reconnaissance de la recherche en sciences infirmières au Québec.

Le Prix Reconnaissance a été remis à Madame Hélène David pour son rôle important au sein de la Table de coordination en sciences infirmières de la CREPUQ et son excellente collaboration lors de son passage à la direction des études supérieures du MELS, principalement dans le dossier des programmes de formation des IPS.

La présidente de l'ACÉSI-RQ 2010-2011, Johanne Goudreau

COUPN-CAATS REPORT 2010-2011

Background

The Council of Ontario University Programs in Nursing (COUPN) and the Provincial Heads of Nursing, Colleges of Applied Arts and Technology (CAATS) promote the advancement of nursing by: presenting the views of nursing education to educational, professional and public organizations; promoting the understanding that nursing education at all levels can contribute to the development of health services in Ontario; promoting standards of excellence in university and college nursing programs; and promoting research and scholarly activity in nursing.

COUPN and CAATS remain committed to working together in partnership to strengthen nursing education.

Actions Taken

- The COUPN and CAATS Executive met over the last year to discuss issues of shared interest, including challenges in clinical education, how to support students who face challenges in passing the registration exam, and the desire of some colleges to offer stand-alone nursing BScN degrees. Some actions following from these discussions included:
 - Development of key recommendation for province-wide action on clinical education, including development of a database of innovative placements and funds to help develop and sustain innovative placements;
 - Development of terms of reference for a clinical education work group of the Joint Provincial Nursing Committee (JPNC), a joint committee of key nursing stakeholder organizations and the Ministry of Health and Long-Term Care (MOHLTC), whose mandate is to advocate and advise government on issues that impact the nursing profession and on matters of policy that promote the health of Ontarians;
 - Support for a province-wide “Enhanced CRNE Prep course” geared towards students who have failed the CRNE one time already, in order to prevent further failures.

- A second annual provincial meeting of COUPN and CAATS clinical placement coordinators was held in June of 2011, to share issues and strategies. Over forty people were in attendance.
- COUPN was honoured to host the fourth annual COUPN Awards, which celebrate excellence in nursing education and scholarship. A new award was created this past year to recognize Excellence in Collaborative Education and was awarded to a college faculty member in a collaborative BScN program.
- 2010-11 saw the expansion of the clinical placement database, HSPnet, to schools and hospitals across the Greater Toronto Area. Altogether six schools and thirteen hospitals in the GTA adopted HSPnet for their clinical placement communication and tracking needs, with a 23% increase overall in the number of educational programs using the database across the province. The database increases transparency and efficiency in organizing and tracking clinical placements, maintains student privacy, and has the potential to open up new clinical placement opportunities.
- COUPN and CAATS will be hosting the CASN research conference in 2012. Planning is in process for an excellent, innovative conference.

COUPN CAATS Executive Committee 2010-11

Catherine Tompkins, McMaster University, COUPN Co-chair

Sandra DeLuca, Fanshawe College, CAATS Co-Chair

Jennifer Medves, Queen's University, COUPN representative

Maria May, Seneca College, CAATS representative

Linda Patrick, University of Western Ontario, COUPN representative

Karen Poole, Lakehead University, COUPN representative

Rosemary Watkins, Humber College, CAATS representative

WESTERN NORTH-WESTERN REGION REPORT 2010-2011

Background

Western North-western Region CASN (WNRCASN) is a regional organization of individual members of CASN-affiliated schools of nursing in western provinces and the western region of the Northwest Territories. Membership is comprised of Deans, Directors, Faculty members, graduate students, and affiliated faculty of CASN-member schools. Each school of nursing elects/selects a Member-at-Large who becomes the communication person for WNRCASN.

Actions Taken

Annual General Meeting

WNRCASN has an annual Nurse Educators Conference and Annual Meeting in February. The 2010 conference was held at the Sutton Place Hotel in Vancouver and hosted by the UBC School of Nursing. The conference theme was *Fostering Quality Learning Environments: Scaling the heights of nursing education*. The conference provided an excellent forum for nurse educators to engage in critical dialogue related to the challenges and innovations in creating quality learning environments. The AGM is held at the end of the conference and was well attended. The main focus was the revised constitution, opportunities for members to network and the development of a more interactive website.

Revised Constitution

The main revision to the constitution was a change to the name of our regional organization. The name change was done to recognize our colleagues in the western region of the Northwest Territories as full members. Prior to the constitutional changes these colleagues were invited to participate, but were not considered full members. The other constitutional changes were reflective of current practice within the organization.

New Website

Over the past year, Karen Andres has been working diligently with our webmaster to create a more interactive website. The vision is to have a website that encourages networking between members, provides a forum for discussion about nursing education, and highlights events and news related to nursing education as well as promoting WNRCASN and CASN initiatives. We expect the new website to be up and running by the end of October.

Annual Awards

This past year, we received 6 applications for our annual awards.

Awards were presented as follows:

- Graduate Student Research Award: *Christie Raymond-Seniuk for her proposal "Nurse Educator's Critical Thinking: A Mixed methods Approach"*

- Education Research Award: *Dr. Angela Wolff, Dr. Lynne Young, Dr. Jane Milliken and Dr. Aura MacPhee for their proposal "Validation of the Nurse Educator Competency Assessment Tools"*
- Education Innovation Award: no applicants

In February 2012, our Conference, Executive and MAL meeting and AGM will be held in at the Coast Lethbridge Hotel and Conference Centre and hosted by University of Lethbridge.

Online Membership

We moved to on-line registration this past year, though our membership numbers were down slightly; there was positive feedback about the on-line membership process. Karen Andres has been working with our webmaster to create a searchable data base from the on-line registration. This will assist in promoting more communication between members on issues of interest to nursing education.

Honorary Membership

Dr. Sharon Simpson from Thompson Rivers University was awarded an Honorary Membership at the 2011 conference. Sharon was noted for her long standing service in nursing education, her commitment to CASN and WRCASN and her role in promoting nursing education at the local, provincial and national levels.

Next Steps

We are continuing to develop our communication network among the member schools in WNRCASN and encouraging debate on nursing education issues in Canada. We will continue to work toward having representation from every eligible school in the Western and North-western Region.

Executive Committee 2010 - 2012

Donna Petri, Thompson Rivers University – President
Karen Andres, Thompson Rivers University, Secretary-Treasurer
Carol McFadyen, University of British Columbia Okanagan, Past President
Monique Sedgwick, University of Lethbridge, Vice-President
Lois Berry, University of Saskatchewan
Kristine Metcalfe, Red River College
Beverly Williams, University of Alberta
Pertice Moffitt, Aurora College
Jane Karpa, Brandon University

CNSA REPORT 2010-2011

The Canadian Nursing Students' Association (CNSA) continues to represent a growing population of nursing students nationwide. To date, CNSA has expanded its voice through growing political involvement, position statements and continued positive relationships with its stakeholders. A new board of directors was elected at our National Conference held in January 2011 in Hamilton Ontario. We were ecstatic that this was our best attended National Conference, with over 800 in attendance. Allow me to introduce the CNSA Board of Directors:

President	Evan Jolicoeur	Vice-President	Mary Strain
Director of Communications	Laura Gallant	Director of Membership Services	Jessica Byvank-Asprey
Director of Bilingualism and Translation	Katherine Lamy	Director of International Health	Katrina Vandebunte
Director of Career & Leadership Development	Sarah Covino	National Conference Director	Lise Schultz
Atlantic Regional Director	Teri-Lynn Butt	Québec Regional Director	Frederic Laurens
Ontario Regional Director	Andrew Bond	Prairies Regional Director	Lindsay Krahm
Western Regional Director	Margaret Danko	Past President	Branden Shepitka
Administrative Officer	Andrea Pinsent-Martineau	CASN Representative	Cynthia Baker

Below is a list of some of our accomplishments so far, and some upcoming events:

New Awards

The board of directors has recognized the importance of student attendance to national conference as the main avenue to BOD leadership. Additionally, a continuing theme within CNSA is the advancement of position statements and resolutions. Evidence based conversation among nursing students from around the country is a way for voices to be heard and passions to be recognized. Due to this focus CNSA has designated 10,000 of new award money that will be given to students to present their position/resolution statements at national conference.

Looking Forward

A new logo has been selected to better represent CNSA, through a slogan competition. It is evident that substantial changes are approaching for CNSA through the new strategic plan and deepened relationships with fellow organizations. Students are more involved and excited about nursing issues than ever. Our attendance at national conference along with our growing membership has been overwhelming and very exciting!

National Conference 2012

This year's CNSA National Conference is taking place January 25th-28th 2012. It will be held in Saskatoon, Saskatchewan at the TCU convention center. This year's theme is "Over coming challenges, harmonizing our voices." We are very excited about our speakers and events.



BOARD OF DIRECTORS 2010-2011

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Clémence Dallaire
Université Laval

Présidente

President-Elect

Linda Ferguson
University of Saskatchewan

Présidente-désignée

Past President

Lynnette Leesberg Stamler
University of Saskatchewan

Treasurer

Barbara Foulds
Algonquin College

Trésorière

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School of Nursing, Thompson Rivers University
Carol Ewashen
University of Calgary
Stephen Bishop
Camosun College

Administratrices - Région de l'ouest

Directors - Ontario Schools

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Fanshawe College
Kirsten Woodend
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Sioban Nelson
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Région de l'Ontario**

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Johanne Goudreau
Université de Montréal
Jacinthe Pepin
Université de Montréal

**Administratrices
Région du Québec**

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Vicki Greenslade
Centre for Nursing Studies

**Administratrices
Région de l'atlantique**

Public Representative

Kathryn Munn
Mediator, Munn Conflict Resolution Services

Représentante du public

Student Representative

Mary Strain
Vice-President, Canadian Nursing Students Association (CNSA)

Représentant des étudiant(e)s

Accreditation Bureau Chair

Pauline Paul
University of Alberta

**Représentante du Bureau
d'Agrement**

COMMITTEE MEMBERS 2010-2011

MEMBRES DES COMITÉS 2010-2011

Audit Committee / Comité d'audit

Clémence Dallaire, Université Laval (Chair)
Barbara Foulds, Algonquin College
Linda Ferguson, University of Saskatchewan
Kathryn Munn, Mediator, Munn Conflict Resolution Services
CASN Executive Director
CASN Staff liaison

Standing Committee on Awards & Nominations/ Comité permanent, Prix et Candidatures

Martine Mayrand-Leclerc, Université de Québec en Outaouais
Kim Critchley, University of Prince Edward Island
Colleen McKey, McMaster University
Diane Tapp, University of Calgary, WRCASN Representative
Denise Bowen, Aurora College
CASN Staff liaison

Standing Committee on Research/Scholarship/ Comité permanent, Recherche et Avancement des connaissances

Linda Ferguson, University of Saskatchewan (Chair)
Clémence Dallaire, Université de Laval (Co-Chair)
Sally Thorne, University of British Columbia
Marilyn MacDonald, Dalhousie University
Aroha Page, Nipissing University
CASN President (Ex-Officio)
CASN Executive Director (Ex-Officio)
CASN Staff liaison

Standing Committee on Education/Comité permanent, Éducation

Jacinthe Pepin, Université de Montréal (Co-Chair), QC
Kristen Woodend, University of Ottawa (Co-Chair), ON
Susan Duncan, Thompson Rivers University, BC (PHSC)
Landa Terblanche, Trinity Western University, BC
Linda Patrick, University of Windsor, ON
Debbie Kane, University of Windsor (SCGS), ON
Carol Ewashen, University of Calgary (SCGS), AB
CASN President (Ex-officio)
CASN Executive Director (Ex-officio)
CASN Staff liaison

CASN Accreditation Bureau (CAB) / Bureau d'agrément

Pauline Paul, University of Alberta (Faculty Rep) (Chair)
Janet Landeen, McMaster University (Faculty Rep)
Pierre Godbout, Université de Moncton (Faculty Rep – Bilingual)
Molly Westland, Fleming College (Faculty Rep)
Josée Belke, Hospital Saint Vincent Hospital (CNA Service Agency Rep – Bilingual)
Michelle Brennan, Director, Professional Practice and Policy, College of Registered Nurses of Nova Scotia (CRNNS) (Regulatory Rep)
Stephanie Leigh Jones, University of Western Ontario (Student/Graduate Rep)
Erin Bruce, College of Nurses of Ontario (CNO Observer)
CASN Staff liaison

Sub-Committee on Graduate Studies/ Forum, Deuxième Cycle

Debbie Kane, Windsor University (Co-Chair)
Margaret Purden, McGill University (Co-Chair)
Carol Ewashen, University of Calgary (Board Liaison)
CASN Staff liaison

Sub-Committee on Public Health/ Sous-comité de la santé publique

Jo Ann Tober, Association of Nursing Directors and Supervisors in Official Health Agencies in Ontario (ANDSOOHA) (Chair)
Susan Duncan, Thompson Rivers University, BC (*co-chair*)
Ruth Schofield, McMaster University, ON
Sherri Buhler, Parkland Regional Health Authority, Manitoba
Elizabeth Elliot, Public Health Nurses Leaders Council of British Columbia
Benita Cohen, University of Manitoba
Omaima Mansi, McGill University
Ruta Valaitis, McMaster University
Donna Meagher-Stewart, Community Health Nurses Association of Canada
Robin Scobie, Canadian Public Health Association
Joan Reiter, Public Health Agency of Canada
Morag Granger, Population and Public Health Services SIC
Marie Dietrich Leurer, University of Saskatchewan
CASN Staff liaison

Task Force on Palliative Care / End-of-Life Care / Groupe de travail sur les soins palliatifs

Brenda Jacono, Cape Breton University (Chair)
Beryl Cable-Williams, Trent University
Cathy Foster, Brandon University
Mitzi Grace-Mitchell, York University
Mireille Lavoie, Université Laval
Holly Richardson, Dalhousie University
Lynne Young, University of Victoria
Heather Jewers, St. Francis Xavier University
Sharon Specht, Canadian Hospice Palliative Care Association
Darcee Bidgood, Canadian Hospice Palliative Care Association
CASN Staff liaison

Task Force on Governance / Groupe de travail - gouvernance

Kathryn Munn, CASN Public Representative (Chair)
Hope Graham, St. Francis Xavier University
Donna Lynn Smith, University of Alberta
Riek van den Berg, The Ottawa Hospital
Kileen Tucker Scott, Ryerson University
CASN President
CASN Executive Director
CASN Staff liaison

Task Force on NP Education

Ruth Martin-Misener, Dalhousie University (Co-Chair)
Eric Staples, McMaster University (Co-Chair)
Christine Patterson, McMaster University
Louise Bujold, Université Laval
Esther Sangster Gormley, University of Victoria
Mary Ellen Andrews, University of Saskatchewan
Jim Rankin, University of Calgary
Kathleen Hunter, University of Alberta
Donna Best, Memorial University
Karen Graham, Aurora College
Josette Roussell, Canadian Nurses Association
Rosanne Jabbour, College of Nurses of Ontario
Monica Parry, University of Toronto
Joyce Bruce, Saskatchewan Institute of Applied Science and Technology (SIAST)
Kristina Chapman, IWK Health Centre
Lynnette Leeseberg Stamler, University of Saskatchewan
Marilyn Ballantyne, McMaster University

Political Advocacy Ad Hoc Committee

Evelyn Kennedy, Cape Breton University
Sioban Nelson, University of Toronto
Jacinthe Pepin, Université de Montréal
Stephen Bishop, Camosun College
Linda Ferguson, University of Saskatchewan
CASN President
CASN Executive Director
CASN Staff liaison

IEN Bridging Programs Task Force

Marlene Tosh, Algonquin College

Cynthia Baker, Canadian Association of Schools of Nursing

Linda Stanger, Canadian Council for Practical Nurse Regulators (CCPNR)

Karen Hargreaves, Canadian Association of Practical Nurse Educators (CAPNE)

Ella Ferris, Academy of Canadian Executive Nurses (ACEN) (representative from Network of chief nursing officers of major teaching hospitals)

Margot McNamee, Canadian Nurses Association (CNA)

Barb Foulds, Canadian Association of Schools of Nursing (CASN)

Lynn Cairns, College of Registered Nurses of BC

Cathy Giblin, College & Association of Registered Nurses of Alberta

Cathy Rose, College of Registered Nurses of Nova Scotia

Jenn Scribner, Health Canada

Diane Clements, Health Canada ONP

Patricia Bradley, York University, School of Nursing

Anne Mann, College of Licensed Practical Nurses of Nova Scotia

Elizabeth Taylor, College of Registered Psychiatric Nurses of Alberta

Sharlene Standing, Canadian Council for Practical Nurse Regulators (CCPRN)

Karen Hargreaves, President, Canadian Association of Practical Nurse Educators (CAPNE)

Cathy Rose, College of Registered Nurses of Nova Scotia

Margot McNamee, Canadian Nurses Association

Edward Cruz, Practicing IEN/Centennial College

Lawrence Cordero, CARE for Nurses

Kim Dalgleish, Human Resources and Skills Development in Canada (HRSDC)

Anna Barkman, Mount Royal University

Cathy Baxter, Red River College

Frederic Thibault-Chabot, Cite Collégiale

Nancy Brown, Mohawk College

Lori Shortridge, Kwantlen Polytechnic University

Nicole Simpson, MacEwan University

Jan Kutcher, Immigrant Settlement and Integration Services

Kate Mercer, RN-Professional Development Center

Jean Wilson, NorQuest College

Diane Larrivee, Regina Qu'Appelle Health Region

Khairunnissa Rhemtulla, Vancouver Costal Health

Lori Shortridge, Kwantlen University

Task Force on Infoway

Alexandra Harris, University of Toronto

Elizabeth Borycki, University of Victoria

Irma Jean Bajnok, Registered Nurses Association of Ontario

Irving Gold, Association of Faculties of Medicine of Canada

Kathryn Hannah, University of Calgary

Loretta Secco, University of New Brunswick

Lorie Donelle, University of Western Ontario

Lynn Nagle, University of Toronto

Mary Strain, CNSA

Maureen Charlebois, Canada Health Infoway

Nora Hammel, Canadian Nurses Association

Noreen Frisch, University of Victoria

Patricia Seaman, University of New Brunswick

Sandra Bassendowski, University of Saskatchewan

Sylvie Dubois, Université de Montréal

Sylvie Jetté, Université de Sherbrooke

Tracy Shaben, Mazankowski Alberta Heart Institute

FINANCIAL STATEMENTS/ÉTATS FINANCIERS

For/Pour

**THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES**

**FOR THE YEAR ENDED MARCH 31, 2011/
POUR L'EXERCICE CLOSE LE 31 MARS 2011**

Welch

INDEPENDENT AUDITORS REPORT

RAPPORT DE L'AUDITEUR INDÉPENDANT

To the members of

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING

We have audited the accompanying financial statements of The Canadian Association of Schools of Nursing, which comprise the statement of financial position as at March 31, 2011 and the statements of operations, changes in net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

Management is responsible for the preparation and fair presentation of these financial statements in accordance with Canadian generally accepted accounting principles, and for such internal control as management determines is necessary to enable the preparation of financial statements that are free from material misstatement, whether due to fraud or error.

Aux membres de

L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES

Nous avons effectué l'audit des états financiers ci-joints de l'Association canadienne des écoles de sciences infirmières, qui comprennent l'état de la situation financière au 31 mars 2011 ainsi que les états des opérations, de l'évolution de l'actif net et des flux de trésorerie pour l'exercice clos à cette date, ainsi qu'un résumé des principales méthodes comptables et d'autres informations explicatives.

Responsabilité de la direction pour les états financiers

La direction est responsable de la préparation et de la présentation fidèle de ces états financiers conformément aux principes comptables généralement reconnus du Canada, ainsi que du contrôle interne qu'elle considère comme nécessaire pour permettre la préparation d'états financiers exempts d'anomalies significatives résultant de fraudes ou d'erreurs.

Auditor's Responsibility

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

Responsabilité de l'auditeur

Notre responsabilité consiste à exprimer une opinion sur les états financiers, sur la base de notre audit. Nous avons effectué notre audit selon les normes d'audit généralement reconnues du Canada. Ces normes requièrent que nous nous conformions aux règles de déontologie et que nous planifions et réalisions l'audit de façon à obtenir l'assurance raisonnable que les états financiers ne comportent pas d'anomalies significatives.

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

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

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of The Canadian Association of Schools of Nursing as at March 31, 2011 and the results of its operations and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.

Opinion

Nous estimons que les éléments probants que nous avons obtenus sont suffisants et appropriés pour fonder notre opinion.

Un audit implique la mise en œuvre de procédures en vue de recueillir des éléments probants concernant les montants et les informations fournis dans les états financiers. Le choix des procédures relève du jugement de l'auditeur, et notamment de son évaluation des risques que les états financiers comportent des anomalies significatives résultant de fraudes ou d'erreurs. Dans l'évaluation de ces risques, l'auditeur prend en considération le contrôle interne de l'entité portant sur la préparation et la présentation fidèle des états financiers afin de concevoir des procédures d'audit appropriées aux circonstances, et non dans le but d'exprimer une opinion sur l'efficacité du contrôle interne de l'entité. Un audit comporte également l'appréciation du caractère approprié des méthodes comptables retenues et du caractère raisonnable des estimations comptables faites par la direction, de même que l'appréciation de la présentation d'ensemble des états financiers.

À notre avis, les états financiers donnent, dans tous leurs aspects significatifs, une image fidèle de la situation financière de l'Association canadienne des écoles de sciences infirmières au 31 mars 2011, ainsi que des résultats de ses opérations financière et de ses flux de trésorerie pour l'exercice clos à cette date, conformément aux principes comptables généralement reconnus du Canada.

Chartered Accountants
Licensed Public Accountants
Ottawa, Ontario
September 21, 2011

Comptables agréés
Experts-comptables autorisés
Ottawa (Ontario)
Le 21 septembre 2011

Welch LLP

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES
STATEMENT OF FINANCIAL POSITION/ÉTAT DE LA SITUATION FINANCIÈRE
MARCH 31, 2011/31 MARS 2011

<u>ASSETS</u>	2011	2010	<u>ACTIF</u>
CURRENT ASSETS			ACTIF À COURT TERME
Cash	\$ 307,254	\$ 228,953	Encaisse
Accounts receivable	233,296	59,505	Débiteurs
Inventory of gifts and awards	1,817	4,476	Stock de cadeaux et de prix
Security deposits and prepaid expenses	34,330	26,100	Dépôts de sécurité et dépenses payées d'avance
Due from Global Alliance for Leadership in Nursing Education and Science - note 6 Investments - note 7	5,327 440,045 1,022,029	5,327 650,752 983,113	A recevoir de Global Alliance for Leadership in Nursing Education and Science - note 6 Placements - note 7
CAPITAL ASSETS - note 8	<u>11,841</u>	<u>19,264</u>	IMMOBILISATIONS - note 8
	<u>\$ 1,033,870</u>	<u>\$ 1,002,377</u>	PASSIF ET ACTIF NET
LIABILITIES AND NET ASSETS			PASSIF À COURT TERME
CURRENT LIABILITIES			Crediteurs et frais courus
Accounts payable and accrued liabilities Deferred conference, accreditation and membership fees	\$ 107,255 205,273 312,528	\$ 103,878 334,687 438,565	Congrès, agréments et cotisations des membres reportées
NET ASSETS			ACTIF NET
Internally restricted:			Restreint à l'intérieur:
Invested in capital assets Dr. Pat L. Griffin Memorial Fund - note 11	11,841	19,264	Investi dans les immobilisations Fonds commémoratif Dr Pat L. Griffin - note 11
Unrestricted:			Non-restréint:
Cumulative net revenue Cumulative net unrealized gains on available for sale unrestricted financial assets	77,387 598,640 <u>33,474</u>	67,406 453,247 <u>721,342</u>	Revenu cumulatif net Gain net non-réalisé cumulatif sur les actifs financiers non-restréints disponibles pour la revente
	<u>\$ 1,033,870</u>	<u>\$ 1,002,377</u>	

Signed on behalf of the Board/Signé au nom du Conseil:

BARBARA FOULDS, RN, PhD Treasurer/Tresorière
CYNTHIA BAKER, RN, PhD Executive Director/Directrice exécutive

(See accompanying notes/voir notes ci-jointes)

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES
STATEMENT OF CHANGES IN NET ASSETS/ÉTAT DE L'ÉVOLUTION DE L'ACTIF NET
YEAR ENDED MARCH 31, 2011/EXERCICE CLOS LE 31 MARS 2011

	<u>Unrestricted/Non-restricte</u>	<u>Internally restricted/ Restreint à l'intérieur</u>					
	<u>Net unrealized gain on available for sale unrestricted financial assets/ Gain net non-réalisé sur les actifs financiers disponibles pour la vente</u>		<u>Invested in capital assets/ Investi dans les immobilisations</u>	<u>Dr. Pat L. Griffin Memorial Fund/ Fonds commémoratif Dr Pat L. Griffin</u>	<u>2011 Total</u>	<u>2010 Total</u>	
Net revenue	\$ 147,949	\$ -	\$ -	\$ -	\$ 147,949	\$ 73,042	Révenu net
Net additions to capital assets	(2,258)	-	2,258	-	-	-	Additions nettes aux immobilisations
Amortization of capital assets	9,681	-	(9,681)	-	-	-	Amortissement des immobilisations
Transfer to Dr. Pat L. Griffin Memorial Fund of 10% of the net revenue of the prior year	(7,304)	-	-	7,304	-	-	Virement au Fonds commémoratif Dr Pat L. Griffin de 10% du revenu net de l'exercice précédent.
Donation income	(8,175)	-	-	8,175	-	-	Dons reçus
Donation made	5,900	-	-	(5,900)	-	-	Dons payés
Unrealized gain in year	-	9,581	-	-	9,581	15,204	Gains non-réalisés de l'exercice
Increase (decrease) in net assets for the year	145,393	9,581	(7,423)	9,979	157,530	88,248	Augmentation (diminution) dans l'actif net pour l'exercice
Balance at beginning of year	453,247	23,893	19,264	67,408	533,512	475,666	Solde au début de l'exercice
Balance at end of year	\$ 598,640	\$ 33,474	\$ 11,841	\$ 77,317	\$ 721,242	\$ 563,812	Solde à la fin de l'exercice

(See accompanying notes/voir notes ci-jointes)

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES
STATEMENT OF OPERATIONS/ÉTAT DES OPÉRATIONS
YEAR ENDED MARCH 31, 2011/EXERCICE CLOS LE 31 MARS 2011

	2011	2010	Revenus
Revenue			
Membership fees	\$ 710,970	\$ 641,765	Cotisations des membres
Special projects, grants and contributions	316,820	194,908	Projets spéciaux, subventions et contributions
Accreditation support fees	150,650	176,700	Fonds de soutiens pour l'accrégement
Accreditation and site review fees	121,584	104,500	Droits d'examen d'accrégement
Conferences	133,251	85,559	Congrès
Council meeting	56,881	43,930	Rencontres du Conseil
Advertising and publications	12,188	14,176	Publicité et publications
Donations	8,175	4,340	Dons
Investment Income - note 9	4,399	1,653	Revenus de placements - note 9
Miscellaneous	-	3,690	Divers
	<u>1,514,898</u>	<u>1,251,221</u>	<u>1,251,221</u>
Expenses			Dépenses
Corporate services	433,933	488,919	Services corporatifs
Accreditation bureau	205,356	206,070	Bureau de l'accrégement
Special projects	316,820	194,908	Projets spéciaux
National office	121,768	71,922	Bureau national
Conferences	154,480	103,214	Congrès
Rent and utilities	72,086	66,332	Loyers et services publics
International	19,429	29,528	International
Professional fees	37,577	17,286	Honoraires professionnels
Donations	5,500	-	Dons
	<u>1,366,949</u>	<u>1,176,179</u>	<u>1,176,179</u>
Net revenue for the year	\$ 147,949	\$ 73,042	Revenu net de l'exercice

(See accompanying notes/voir notes ci-jointes)

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES
STATEMENT OF CASH FLOWS/ÉTAT DES FLUX DE TRÉSORERIE
YEAR ENDED MARCH 31, 2011/EXERCICE CLOS LE 31 MARS 2011

CASH PROVIDED BY (USED FOR):				ENCAISSE FOURNIE (UTILISÉE) PAR: LES ACTIVITÉS D'EXPLOITATION
2011	2010	\$		
OPERATING ACTIVITIES				
Net revenue for the year	\$ 147,949	\$ 73,042		Revenu net de l'exercice
Adjustment for amortization	<u>9,681</u>	<u>5,572</u>		Ajustement pour l'amortissement
Change in the level of:				Changement dans le niveau des:
Accounts receivable	<u>157,630</u>	<u>78,614</u>		Débiteurs
Inventory of gifts and awards	(173,751)	188,613		Stock de cadeaux et de prix
Security deposits and	2,659	1,575		Dépôts de sécurité et dépenses
prepaid expenses	(8,230)	(2,100)		payées d'avance
Due from Global Alliance for Leadership in Nursing Education and Science				À recevoir de Global Alliance for Leadership in Nursing Education and Science
Accounts payable and accrued liabilities	3,377	93		Créditeurs et frais courus
Deferred conference, accreditation and membership fees	<u>(129,414)</u>	<u>191,176</u>		Congrès, agréments et cotisations des membres reportés
	<u>(147,729)</u>	<u>383,964</u>		
INVESTING ACTIVITIES				ACTIVITÉS D'INVESTISSEMENT
Purchase of capital assets	(2,258)	(11,615)		Achat d'immobilisations
Proceeds on sales of investments - net	<u>228,288</u>	<u>(319,622)</u>		Achat de placements
	<u>226,030</u>	<u>(331,237)</u>		
CASH PROVIDED IN YEAR	78,301	52,727		ENCAISSE FOURNIE AU COURS
CASH AT BEGINNING OF YEAR	<u>228,953</u>	<u>176,226</u>		DE L'EXERCICE
CASH AT END OF YEAR	\$ 307,254	\$ 228,953		ENCAISSE À LA FIN DE L'EXERCICE

(See accompanying notes/voir notes ci-jointes)

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES

NOTES TO THE FINANCIAL STATEMENTS
YEAR ENDED MARCH 31, 2011

NOTES AUX ÉTATS FINANCIERS
EXERCICE CLOS LE 31 MARS 2011

1. PURPOSE OF ORGANIZATION

The Canadian Association of Schools of Nursing (CASN) is a not-for-profit organization formed in 1942, and incorporated in 2003, with the objective of leading nursing education and nursing scholarship in the interest of healthier Canadians. The Association is a registered charity and as such is exempt from income taxes.

2. SIGNIFICANT ACCOUNTING POLICIES

Revenue recognition

The Association records revenue from membership fees and accreditation support fees in the fiscal year to which they relate, if receipt thereof is reasonably assured.

The Association records revenue from accreditation and review fees when the site review has been substantially completed if receipt thereof is reasonably assured.

Revenue from advertising is recognized when the service has been rendered and revenue from publications is recognized upon delivery.

Donation revenue is accounted for when received.

Investment income includes dividends and interest income, amortization of discounts and premiums on fixed income investments, and realized gains and losses. Unrealized gains and losses on available for sale financial assets are included directly in net assets until the asset is disposed of.

Council meeting revenue is recognized at the time of the meeting if receipt thereof is reasonably assured.

Conference revenue is recognized at the time of the conference if receipt thereof is reasonably assured.

Special project revenue is recognized on special projects at the time the deliverable is presented.

The Association follows the deferral method of accounting for contributions and grants. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when they are received or receivable if the amount can be reasonably estimated and its collection can be reasonably assured.

1. OBJECTIFS DE L'ENTITÉ

L'Association canadienne des écoles de sciences infirmières (ACESI) est un organisme sans but lucratif fondé en 1942 et incorporée en 2003. Les objectifs de la société sont d'orienter la formation infirmière et d'avancer les connaissances en sciences infirmières dans l'intérêt d'une meilleure santé des Canadiens et des Canadiens. L'Association est un organisme de charité aux fins de la Loi sur l'impôt au Canada et en tant que tel est exempt d'impôt sur le revenu.

2. PRINCIPALES CONVENTIONS COMPTABLES

Constatation des recettes

L'Association inscrit aux livres les cotisations des membres et les fonds de soutiens pour agrément dans l'année fiscale durant laquelle ils sont dus, pourvu que le recouvrement soit raisonnablement sûr.

L'Association inscrit les produits des droits d'examen d'agrément lorsque l'examen du programme a été achevé ou quasi achevé, pourvu que le recouvrement soit raisonnable sûr.

Les produits de publicité sont inscrits lorsque le service a été rendu. De même, les produits des publications sont inscrits lorsque les publications ont été livrées.

Les produits issus de dons sont inscrits lorsqu'ils sont reçus.

Les revenus de placements comprennent les revenus d'intérêt et les dividendes, l'amortissement des primes et des escomptes sur les obligations, et les gains et pertes de capital réalisés. Les gains et pertes de capital non réalisés sur les actifs financiers disponibles à la vente sont inclus directement dans les actifs nets jusqu'au moment de la vente de l'actif financier en question.

Les produits des rencontres du Conseil sont inscrits lorsque la rencontre a lieu, pourvu que le recouvrement soit raisonnablement sûr.

Les produits des congrès sont inscrits lorsque le congrès a lieu, pourvu que le recouvrement soit raisonnablement sûr.

Les produits des projets spéciaux sont inscrits au compte des projets spéciaux lorsque l'objectif du projet est atteint ou le produit final est délivré.

L'Association utilise la méthode du report pour les contributions et les subventions. Les contributions et subventions affectées sont reconnues comme produit dans l'année où les charges afférentes sont encourues. Les contributions et subventions non affectées sont reconnues comme produit lorsqu'elles sont reçues ou lorsqu'elles sont à recevoir et que le montant de la contribution ou de la subvention et son recouvrement sont raisonnablement sûrs.

Welch LLP

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES

NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
YEAR ENDED MARCH 31, 2011

NOTES AUX ÉTATS FINANCIERS - Suite

EXERCICE CLOS LE 31 MARS 2011

2. SIGNIFICANT ACCOUNTING POLICIES - Cont'd.		2. CONVENTIONS COMPTABLES IMPORTANTES - suite	
<i>Donated services</i>		<i>Bénévolat</i>	
The value of donated services is not recognized in these statements.		La valeur des services de bénévolat n'est pas inscrite aux livres comptables.	
<i>Inventories</i>		<i>Stocks</i>	
Inventory of gifts and awards are recorded at the lower of cost or net realizable value with cost being recorded on a first-in, first-out basis.		Les stocks de cadeaux et de prix sont inscrits au moindre du coût et de la valeur de réalisation nette. Le coût est enregistré selon la méthode du premier entré, premier sorti.	
<i>Investments</i>		<i>Placements</i>	
The Association has classified its investments as available for sale and has recorded them at fair value.		L'Association a classifié ses actifs financiers en tant que disponible à la vente et les a inscrits aux livres à leur juste valeur marchande.	
Fair values of fixed income securities and equities are determined by reference to published price quotations in an active market at year-end. Term deposits are stated at amortized costs plus accrued interest which approximates fair value.		Les justes valeurs marchandes des obligations et des actions sont déterminées en référence aux prix publiés dans le marché actif en fin d'année. Les dépôts à terme sont inscrits au coût amorti, plus les intérêts courus, ce qui correspond plus ou moins à la juste valeur marchande.	
The purchase and sale of investments are accounted for using settlement date accounting. Transactions costs are expensed as incurred.		L'achat et la vente des actifs financiers sont inscrits aux livres comptables à date de règlement. Les coûts de transactions sont passés en dépenses lorsqu'ils sont encourus.	
<i>Capital assets</i>		<i>Immobilisations</i>	
Capital assets are stated at acquisition cost. Amortization is provided on the straight line basis at the following annual rates:		Les immobilisations sont inscrites au coût d'acquisition. L'amortissement est calculé selon la méthode de l'amortissement linéaire selon les taux annuels suivants :	
Computer equipment Office equipment Leasehold improvements	3 years 5 years Lease term	Équipement informatique Matériel de bureau Améliorations locatives	3 ans 5 ans durée du bail
<i>Use of estimates</i>		<i>Utilisation d'estimations</i>	
The preparation of financial statements in conformity with generally accepted accounting principles requires management to make estimates and assumptions that affect the reported amounts of assets and liabilities and disclosure of contingent assets and liabilities at the date of the financial statements and the reported amounts of revenues and expenses during the reporting period. Actual results could differ from these estimates.		La préparation d'états financiers conformément aux principes comptables généralement reconnus du Canada exige que la direction fasse des estimés et pose des hypothèses qui ont un effet sur les montants comptabilisés pour les actifs, les passifs et sur la divulgarion d'actifs et passifs éventuels en date des états financiers ainsi que sur les montants comptabilisés pour les revenus et des dépenses de l'exercice. Les résultats réels pourraient être différents de ces estimés.	

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES

NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
YEAR ENDED MARCH 31, 2011

NOTES AUX ÉTATS FINANCIERS - Suite
EXERCICE CLOS LE 31 MARS 2011

3. FINANCIAL INSTRUMENTS

The Association's cash is classified as held for trading and is measured at fair value. The Association's investments are classified as available for sale and are measured at fair value. The Association's accounts receivable (and Due from Global Alliance for Leadership in Nursing Education and Science) are classified as loans and receivables, and its accounts payable and accrued liabilities are classified as liabilities. Amounts classified as loans and receivables and other liabilities are measured at amortized cost in the financial statements which approximates fair value due to their short term nature.

3. INSTRUMENTS FINANCIERS

L'encaisse est classé comme détenu pour fins de transactions et est inscrit aux livres à sa juste valeur. Les placements de l'Association sont classés comme détenus pour fins de vente et inscrits aux livres à leur juste valeur. Les débiteurs et le montant à recevoir de Global Alliance for Leadership in Nursing Education and Science sont classés en tant que prêts et débiteurs, et les comptes à payer et frais courus sont classés comme autres passifs. Les montants inscrits dans les prêts, débiteurs et autres passifs sont inscrits au coût amorti dans les états financiers, ce qui équivaut à leur juste valeur à cause de la nature courante de ces postes.

Credit risk

The Association provides credit to its clients in the normal course of operations. The Association manages its credit risk by reviewing accounts receivable ageing monthly and following up on outstanding amounts.

Risque de crédit

L'Association fournit du crédit à ses clients dans le cours normal de ses opérations. L'Association gère son risque de crédit en procédant à un examen du solde des comptes à recevoir chaque mois et en effectuant le suivi des comptes en souffrance.

Interest rate risk and other price risk

The Association manages the interest rate risk and market rate exposure of its investments by investing a large proportion of its portfolio (75%) in a combination of Guaranteed Investment Certificates with laddered maturity dates, and money market funds. The balance of the portfolio (25%) is invested in equities, which are exposed to other price risks.

Risque de taux d'intérêt et autre risque de marché

L'Association gère l'exposition aux risques du taux d'intérêt et du marché de ses placements en investissant une part importante de son portefeuille (75%) dans une combinaison de certificats de placements garantis ayant des échéances échelonnées et de fonds du marché monétaire. Le solde du portefeuille (25%) est investi dans des actions qui sont exposées à d'autres risques de marché.

Currency risk

The Association is only exposed to currency risk to the extent that approximately 7% of its investments are held in a Foreign Equity Mutual Fund. Substantially all other transactions are denominated in Canadian dollars.

Risque de change

L'Association est exposée au risque de change dans la mesure où elle investi près de 7% de ses fonds dans un Fonds mutual d'actions étrangères. Presque toutes ses autres transactions sont effectuées en dollars canadiens.

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES

NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
YEAR ENDED MARCH 31, 2011

NOTES AUX ÉTATS FINANCIERS - Suite
EXERCICE CLOS LE 31 MARS 2011

4. FUTURE ACCOUNTING STANDARDS FOR THE
NOT-FOR-PROFIT SECTOR

The Accounting Standards Board of the Canadian Institute of Chartered Accountants (CICA) recently approved a financial reporting framework designed specifically to meet the needs of users of financial statements prepared by not-for-profit organizations. These new standards must be applied to the Association by March 31, 2013, fiscal year-end and the Association is permitted to adopt these standards next year if they wish to do so. Not-for-profit organizations are given the option to adopt International Financial Reporting Standards (IFRS) instead of the new not-for-profit accounting standards if that is the Association's preferred course of action. Management is currently evaluating the impact of this new reporting framework on its financial statements.

4. NORMES DE COMPTABILITÉ FUTURES POUR LES
ORGANISMES SANS BUT LUCRATIF

Le Conseil des normes comptables de l'Institut canadien des comptables agréés (ICCA), a récemment approuvé la mise en place d'un cadre conceptuel d'information financière conçu spécifiquement afin de rencontrer les besoins des utilisateurs des états financiers préparés par les organismes sans but lucratif. Ces nouvelles normes doivent être appliquées aux états financiers de l'Association pour l'exercice terminé le 31 mars 2013 et l'Association a le droit d'adopter ces normes au cours du prochain exercice si elle le désire. Aussi, les organismes sans but lucratif ont le choix d'adopter les Normes internationales d'information financière (IFRS) au lieu de ces nouvelles normes si elles le désirent. La direction évalue présentement l'impact de ce nouveau cadre conceptuel sur ses états financiers.

5. ALLOCATION OF GENERAL SUPPORT COSTS

General support costs of \$769,283 (2010 - \$652,134) have been allocated to specific functions, based on the Association's calculation of actual use, as follows:

	2011	2010	
National office	\$ 54,365	\$ 71,922	Bureau national
Accreditation bureau	131,604	37,051	Bureau de l'accréditation
Corporate services	430,804	488,919	Services corporatifs
Special projects	152,510	54,242	Projets spéciaux
	<u>\$ 769,283</u>	<u>\$ 652,134</u>	

The allocated costs are as follows:

	2011	2010	
Salaries	\$ 647,515	\$ 529,755	Salaires
Office expenses	121,768	122,379	Frais de bureau

\$ 769,283 \$ 652,134

Les dépenses réparties sont comme suit:

Welch

**THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES**

**NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
YEAR ENDED MARCH 31, 2011**

**NOTES AUX ÉTATS FINANCIERS - Suite
EXERCICE CLOS LE 31 MARS 2011**

6. RELATED PARTY TRANSACTIONS

The Association is in an alliance with "Global Alliance for Leadership in Nursing Education and Science (GANES)". The Association is one of the five members of the Alliance and CASN provided the bookkeeping services for GANES, free of charge. At year end, an amount of \$5,327 (2010: \$5,327) was receivable from GANES interest free and with no definite terms of repayment.

The transactions with this affiliated entity are recorded at their exchange amount in accordance with the agreements signed between the parties.

7. INVESTMENTS

Investments consist of the following:

	2011	2010		
	<u>Cost/ Coût</u>	<u>Fair value/ Juste valeur</u>	<u>Cost/ Coût</u>	<u>Fair value/ Juste valeur</u>
Guaranteed investment certificates	\$ 327,038	\$ 327,038	\$ 555,500	\$ 555,500
Canadian money market funds	27,170	27,170	27,097	27,098
Canadian equity mutual fund	35,935	56,418	35,835	47,569
Foreign equity mutual fund	<u>16,428</u>	<u>29,419</u>	<u>16,427</u>	<u>28,585</u>
	<u>\$ 408,571</u>	<u>\$ 440,045</u>	<u>\$ 834,859</u>	<u>\$ 658,752</u>

8. CAPITAL ASSETS

Capital assets consist of the following:

	2011	2010
	<u>Accumulated amortization/ cumulé</u>	<u>Accumulated amortization/ cumulé</u>
Office equipment	\$ 707	\$ 355
Leasehold improvements	64,063	61,756
Computer equipment	<u>22,827</u>	<u>13,645</u>
	<u>\$ 87,597</u>	<u>\$ 75,756</u>
Accumulated amortization	<u>(75,756)</u>	<u>(66,075)</u>
	<u>\$ 11,841</u>	<u>\$ 19,264</u>

Les immobilisations comprennent ce qui suit:

	2010	
	<u>Cost/ Coût</u>	<u>Accumulated amortization/ cumulé</u>
Office equipment	\$ 707	\$ 707
Leasehold improvements	64,063	64,063
Computer equipment	<u>22,827</u>	<u>20,559</u>
	<u>\$ 87,597</u>	<u>\$ 85,339</u>

Amortissement cumulé

\$ 19,264

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES

NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
YEAR ENDED MARCH 31, 2011

NOTES AUX ÉTATS FINANCIERS - Suite
EXERCICE CLOS LE 31 MARS 2011

<p>9. INVESTMENT INCOME</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">Interest</td> <td style="text-align: right;">\$ 4,225</td> <td style="text-align: right;">\$ 2,531</td> <td style="text-align: left;">Intérêts</td> </tr> <tr> <td style="text-align: right;">Dividends</td> <td style="text-align: right;">174</td> <td style="text-align: right;">(878)</td> <td style="text-align: left;">Gains (pertes) réalisés sur les placements</td> </tr> <tr> <td></td> <td style="text-align: right;">\$ 4,399</td> <td style="text-align: right;">1,653</td> <td></td> </tr> </table>	Interest	\$ 4,225	\$ 2,531	Intérêts	Dividends	174	(878)	Gains (pertes) réalisés sur les placements		\$ 4,399	1,653		<p>9. REVENU DE PLACEMENTS</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">Interest</td> <td style="text-align: right;">\$ 4,225</td> <td style="text-align: right;">\$ 2,531</td> <td style="text-align: left;">Intérêts</td> </tr> <tr> <td style="text-align: right;">Dividends</td> <td style="text-align: right;">174</td> <td style="text-align: right;">(878)</td> <td style="text-align: left;">Gains (pertes) réalisés sur les placements</td> </tr> <tr> <td></td> <td style="text-align: right;">\$ 4,399</td> <td style="text-align: right;">1,653</td> <td></td> </tr> </table>	Interest	\$ 4,225	\$ 2,531	Intérêts	Dividends	174	(878)	Gains (pertes) réalisés sur les placements		\$ 4,399	1,653		<p>10. COMMITMENTS</p> <p>The Association has entered into a commercial lease for their office headquarters and a rental contract for equipment. As at March 31, 2011, the balance to be paid under these lease commitments is approximately as follows:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">20112</td> <td style="text-align: right;">\$ 60,500</td> <td style="text-align: right;">20112</td> </tr> <tr> <td style="text-align: right;">20113</td> <td style="text-align: right;">67,200</td> <td style="text-align: right;">20113</td> </tr> <tr> <td style="text-align: right;">2014</td> <td style="text-align: right;">68,400</td> <td style="text-align: right;">2014</td> </tr> </table> <p>11. DR. PATT L. GRIFFIN MEMORIAL FUND</p> <p>The fund was established by the Board of Directors on May 10, 2007.</p> <p>The purpose of this fund is to acknowledge Dr. Griffin by supporting Canadian research in nursing education and establishing a chair in nursing education.</p> <p>During the year, the Board of Directors directed that \$7,304 be transferred into the fund from unrestricted net assets. This amount represents ten percent of the 2010 net revenue. Also, all donations received were allocated to this fund.</p> <p>12. CAPITAL</p> <p>CICA Handbook Section 1535 requires that the Association disclose information about its capital and how it is managed.</p> <p>The Association defines its capital as its net assets. The organization's objectives with respect to managing capital are to comply with any external restrictions on its net assets and to hold sufficient unrestricted net assets to fund ongoing operations. The organization monitors its capital requirements and objectives through its budgeting process, its financial statement review process and review of these terms and conditions contained in its agreements. Management believes that the organization has adhered to any externally imposed restrictions (primarily on grants, contributions and special projects).</p>	20112	\$ 60,500	20112	20113	67,200	20113	2014	68,400	2014	<p>10. ENGAGEMENTS</p> <p>L'Association a signé un bail commercial pour leur siège social et un contrat de location pour de l'équipement. Au 31 mars 2010 le solde à payer pour ces engagements étaient d'environ:</p> <table border="1" style="width: 100%; border-collapse: collapse;"> <tr> <td style="text-align: right;">20112</td> <td style="text-align: right;">\$ 60,500</td> <td style="text-align: right;">20112</td> </tr> <tr> <td style="text-align: right;">20113</td> <td style="text-align: right;">67,200</td> <td style="text-align: right;">20113</td> </tr> <tr> <td style="text-align: right;">2014</td> <td style="text-align: right;">68,400</td> <td style="text-align: right;">2014</td> </tr> </table> <p>11. LE FONDS COMMÉMORATIF DR PATT L. GRIFFIN</p> <p>Ce fonds a été établi par le conseil d'administration le 10 mai 2007.</p> <p>Le but de fonds est de rendre hommage au Dr Griffin en supportant la recherche canadienne en soins infirmiers et en instaurant une chaire en formation de soins infirmiers.</p> <p>Au cours de l'année un montant de 7 304\$ des actifs nets non-restrints ont été transférés au Fonds commémoratif selon les directives du Conseil d'administration. Ce montant représente dix pourcent du revenu net de 2010. Aussi, tous les dons reçus furent alloués à ce fonds.</p> <p>12. CAPITAL</p> <p>Le Manuel de l'ICCA, chapitre 1535, exige que l'Association fourisse de l'information concernant le capital et ses procédures de gestion du capital.</p> <p>L'Association définit son capital comme étant son actif net. Les objectifs de l'Association en ce qui concerne la gestion de son capital sont se conformer aux restrictions externes et de maintenir suffisamment de fonds non-restrints pour financer ses opérations. L'organisation contrôle ses objectifs et exigences en ce qui a trait à son capital par son processus budgétaire, son processus d'examen des états financiers et la révision des conditions comprises dans ses ententes de contribution. La direction croit que l'Association s'est conforme aux restrictions externes (surtout en ce qui a trait aux subventions, contributions et projets spéciaux).</p>	20112	\$ 60,500	20112	20113	67,200	20113	2014	68,400	2014
Interest	\$ 4,225	\$ 2,531	Intérêts																																										
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20112	\$ 60,500	20112																																											
20113	67,200	20113																																											
2014	68,400	2014																																											



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Dr. Pat L. Griffin Fund of CASN

This fund will support Canadian research in nursing education. Its long-term vision is to support an endowed Chair in nursing education research in Canada. At present, funds available for research in nursing education are virtually non-existent. The science of nursing education remains relatively undeveloped. As nursing education is the lifeblood of the profession, this fund will foster excellence in Canadian nursing education.

Please help CASN make research in nursing education a priority by donating to this fund.

Dr. Pat Griffin was the Executive Director of the Canadian Association of Schools of Nursing from January 2005 to May 2007. She passed away on May 6th, 2007.

Donations to this fund will be accepted by CASN, 99 Fifth Avenue, Suite 15, Ottawa ON K1S 5K4.

Please issue cheque in the "Dr. Pat L. Griffin Fund".

A charitable receipt can be provided for donations over \$10.00.

For more information, telephone: 613-235-3150 or by email at inquire@casn.ca



THANK YOU FOR YOUR PARTICIPATION IN THE
2011 CASN COUNCIL MEETING.
SEE YOU NEXT YEAR!



NOUS VOUS REMERCIONS POUR VOTRE
PARTICIPATION À LA RÉUNION DU
CONSEIL DE L'ACÉSI DE 2011
À L'AN PROCHAINE!

The background of the image features a complex, abstract pattern of glowing lines in various colors, primarily red, orange, and yellow, against a dark, almost black, background. These lines create a sense of depth and motion, resembling light trails or neural pathways.

CASN
ACESI ➤