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General bylaws
of the British Columbia College of Nurses and Midwives

April 1, 2026

GENERAL BYLAWS OF THE
BRITISH COLUMBIA COLLEGE OF NURSES AND MIDWIVES

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PART 1 - INTERPRETATION

Short title

1-1 These bylaws may be cited as the *BCCNM General Bylaws*.

Definitions

1-2 In these bylaws:

"Act" means, unless the context requires otherwise, the *Health Professions and Occupations Act*, S.B.C. 2022, c. 43;

"board chair" means the board chair selected under section 2-2;

"board support committee" means a committee established under section 3-1(2);

"board vice-chair" means the board vice-chair elected under section 2-2;

"bylaws" includes the *BCCNM General Bylaws* and any other bylaws made by the board under the Act or continued in force under section 538 of the Act;

"closed meeting" means a board meeting at which the board permits invited college staff or other invited guests to attend at its discretion but not other persons who are not board members;

"college" means the British Columbia College of Nurses and Midwives;

"conflict of interest" means the existence of a personal or private interest or relationship, including a direct or indirect financial interest, or a duty or loyalty owed to another organization, individual or entity, that a reasonably well-informed person would conclude has, will have, or gives rise to a real and substantial risk that it may have, an improper effect or influence on a person's exercise or performance of any duty, power or function under the Act or bylaws;

"deliver", with reference to a notice or other type of record that is not required to be served formally under the HPOR, includes any of the following:

(a) mail to, or leave with, any person who appears to be an adult and an occupant or worker at the last address provided to the college;

(b) deposit in a person's mailbox or receptacle at the person's residence or place of business or practice at the last address provided to the college;

(c) transmit to a person's electronic mail address at the last address provided to the college;

(d) otherwise send or make available to a person in printed or electronic form;

"employed student licence" means an employed student psychiatric nurse licence or employed student nurse licence, and **"employed student licensee"** means a licensee in one of those classes;

"employee of the college" includes a quality assurance assessor, investigator or capacity officer,

"FIPPA" means the *Freedom of Information and Protection of Privacy Act*, R.S.B.C. 1996, c. 165;

"former Act" means the *Health Professions Act*, R.S.B.C. 1996, c. 183;

"former bylaws" means the former bylaws of the college under the former Act before the HPOA effective date;

"HPOA effective date" means April 1, 2026;

"HPOR" means the *Health Professions and Occupations Regulation*, B.C. Reg. 126/2025;

"*in camera* meeting" means a board meeting at which the board excludes persons who are not board members from attending;

"in good standing" means, in respect of a licensee, that

(a) the licensee's licence in any class is not suspended under the Act, and

(b) the licensee's practice is not subject to any limits or conditions imposed under

  (i) a disciplinary order, a continuing practice order or a summary protection order made under the Act, or

  (ii) an adverse application decision described in section 53(2)(b) or (c) of the Act;

"investigation committee" includes the inquiry committee under the former Act, when the context requires it;

"investigator" includes an inspector under the former Act, when the context requires it;

"LGN licence" means a practising LGN licence or provisional LGN licence, and **"LGN licensee"** means a licensee in one of those classes;

"LPN currency requirement" means the requirement described in section 11-13 for LPN licensees to demonstrate currency in practical nursing practice;

"LPN licence" means a practising LPN licence, provisional LPN licence, multijurisdictional LPN licence or temporary LPN (emergency) licence, and **"LPN licensee"** means a licensee in one of those classes;

"midwife consolidation requirement" means the requirement described in section 11-20 for midwife licensees to demonstrate consolidation of their midwifery practice;

"midwife currency requirement" means the requirement described in section 11-17 for midwife licensees to demonstrate currency in midwifery practice;

"midwife licence" means a practising midwife licence, provisional midwife licence, temporary midwife (emergency) licence or non-practising midwife licence, and **"midwife licensee"** means a licensee in one of those classes;

"multijurisdictional licence" means a multijurisdictional LPN licence, multijurisdictional RPN licence or multijurisdictional RN licence, and **"multijurisdictional licensee"** means a licensee in one of those classes;

"NMR" means the *Nurses and Midwives Regulation*, B.C. Reg. 133/2025;

"NP currency requirement" means the requirement described in section 11-16 for NP licensees to demonstrate currency in nursing practice as a nurse practitioner, in addition to satisfying the RN currency requirement;

"NP licence" means a practising NP licence, provisional NP licence or temporary NP (emergency) licence, and **"NP licensee"** means a licensee in one of those classes;

"PIPA" means the *Personal Information Protection Act*, S.B.C. 2003, c. 63;

"practising licence" means a practising LPN licence, practising RPN licence, practising RN licence, practising LGN licence, practising NP licence or practising midwife licence, and **"practising licensee"** means a licensee in one of those classes;

"provisional licence" means a provisional LPN licence, provisional RPN licence, provisional RN licence, provisional LGN licensee, provisional NP licence or provisional midwife licence, and **"provisional licensee"** means a licensee in one of those classes;

"regulations" means the regulations under the Act;

"regulatory committee" means a committee established under section 3-1(1);

"RHPR" means the *Regulated Health Practitioners Regulation*, B.C. Reg. 129/2025;

"RN currency requirement" means the requirement described in section 11-15 for RN licensees and LGN licensees to demonstrate currency in nursing practice;

"RN licence" means a practising RN licence, provisional RN licence, multijurisdictional RN licence, temporary RN (emergency) licence or employed student nurse licence, and **"RN licensee"** means a licensee in one of those classes;

"RPN currency requirement" means the requirement described in section 11-14 for RPN licensees to demonstrate currency in psychiatric nursing practice;

"RPN licence" means a practising RPN licence, provisional RPN licence, multijurisdictional RPN licence, temporary RPN (emergency) licence or employed student psychiatric nurse licence, and **"RPN licensee"** means a licensee in one of those classes;

"service provider" has the same meaning as in Schedule 1 of FIPPA;

"temporary (emergency) licence" means a temporary LPN (emergency) licence, temporary RPN (emergency) licence, temporary RN (emergency) licence, temporary NP (emergency) licence or temporary midwife (emergency) licence, and **"temporary (emergency) licensee"** means a licensee in one of those classes.

PART 2 - BOARD

Responsibilities of board

2-1 Subject to the Act, the regulations and the bylaws, the board and all board members must be guided by the following principles when carrying out their responsibility to govern the college under section 344 of the Act and exercising any other powers or performing any other duties under the Act, the regulations and the bylaws:

(a) the board speaks with one voice;

(b) the board governs the college by

(i) making bylaws that are required or authorized under the Act,

(ii) establishing policies that the board considers necessary or appropriate to promote the guiding principles in section 14 of the Act, the effective governance of the college, and the oath of office taken by all board members under section 19 of the HPOR, including any policies required by the bylaws,

(iii) issuing strategic direction consistent with the Act, the regulations, the bylaws, board-approved policies and the oath of office, and

(iv) providing oversight of organizational performance, risk, and compliance with the Act, regulations and bylaws;

(c) individual board members do not direct college staff or engage in the day-to-day administration and operations of the college except as expressly authorized by the board or required by law.

Board chair and board vice-chair

2-2 (1) At the first board meeting of each calendar year, the board members must select a board chair and a board vice-chair from among the board members using the following procedure:

(a) the acting chair must call for nominations;

(b) if there is only one nominee for board chair or for board vice-chair, the nominee is selected by acclamation;

(c) if there is more than one nominee for board chair or for board vice-chair, the board must select the board chair or board vice-chair, as the case may be,

(i) by applying the procedures in the *Consensus Decision Policy*, or

(ii) if the procedures in the *Consensus Decision Policy* do not apply, by plurality vote of the board members in attendance, or, in the event of a tie between nominees with the most votes, by random draw between the tied nominees with the most votes.

(2) A board chair or board vice-chair selected under subsection (1) holds office for a term of one year.

(3) A board chair or board vice-chair cease to hold office

(a) upon selection of a new board chair or board vice chair, as applicable,

(b) upon ceasing to be a board member,

(c) if they deliver a written notice of resignation from the office of board chair or board vice-chair to the registrar, upon the effective date specified in the notice or, if no effective date is specified, upon receipt of the notice by the registrar,

(d) upon their death, or

(e) upon their removal from the office of board chair or board vice-chair by board members applying the procedures in the *Consensus Decision Policy* or, if those procedures do not apply, by a majority vote of the other board members.

(4) If the board chair or board vice-chair ceases to hold office, the board must elect, as soon as reasonably practicable, another board chair or board vice-chair to fill the vacancy for the unexpired term of office using the process in subsection (1).

Powers and duties of board chair and board vice-chair

2-3 (1) The board may delegate powers and duties of the board to the board chair, subject to any terms, limits or conditions the board considers necessary or appropriate in the circumstances.

(2) The board chair

(a) must preside at all board meetings,

(b) must fulfill duties under the Act, the regulations and the bylaws, and

(c) may exercise powers and must perform duties delegated by the board.

(3) If the board chair is absent or unable to act for any reason, the board vice-chair may exercise the powers and must perform the duties of the board chair.

(4) If the board chair and board vice-chair are absent or unable to act for any reason, the board must select an acting board chair by applying the procedures in the *Consensus Decision Policy* or, if those procedures do not apply, by majority vote, to preside at the meeting and to exercise powers and perform duties of the board chair, subject to any terms, limits or conditions the board considers necessary or appropriate in the circumstances.

Board member remuneration and expenses

2-4 Board members are entitled to receive remuneration for time spent on college business and reimbursement for reasonable travel and other expenses necessarily incurred in performing college business as set out in Schedule A.

Frequency of board meetings

2-5 The board must meet at least four times in each calendar year.

Format of board meetings

2-6 The board may meet and conduct business in person, by telephone, by video conference, or by any other method of communication that allows all board members in attendance to interact with each other, or in hybrid manner.

Calling board meetings

2-7 (1) A board meeting must be scheduled by the registrar

(a) at the request of the board chair, or

(b) on receipt of a written request for a board meeting signed by a majority of the board members.

(2) A written request under subsection (1)(b) must state the nature of the business proposed to be conducted at the meeting

Notice of board meetings

2-8 (1) The registrar must provide reasonable notice of a board meeting to board members and the public.

(2) The registrar may provide notice under subsection (1) by posting a notice on the college website.

(3) Despite subsection (1), notice of a board meeting to the public is not required if the purpose of the meeting is to

(a) conduct urgent business, or

(b) conduct business in a closed or *in camera* meeting as permitted under these bylaws.

(4) The failure to provide notice of a board meeting to a person entitled to receive notice, or the non-receipt of such notice by any person, does not invalidate board meeting proceedings.

(5) Subject to subsection (6), the registrar must provide the following to any person, on request:

(a) details of the date, time and place of a board meeting;

(b) a copy of the agenda for the board meeting;

(c) a copy of the minutes of any previous board meeting.

(6) A copy of an agenda provided under subsection (5)(b) or minutes provided under subsection (5)(c) may be edited to remove information about any matter referred to in section 2-9(3), if the reasons for removing that information are noted in the edited agenda or minutes.

Open, closed and *in camera* board meetings

2-9 (1) Subject to subsections (2) to (4), board meetings are open to the public.

(2) The board may exclude any person who is not a board member from all or part of a board meeting if satisfied that their attendance is or is likely to be disruptive.

(3) The board may convene a closed or *in camera* meeting to discuss any of the following matters:

(a) financial, personal, or other matters of such a nature that the interests of any affected person, or the public interest in avoiding disclosure of such matters, outweighs the public interest in having board meetings open to the public;

(b) information concerning an application by any individual for licensure under section 41 of the Act or for certification under section 7-3, or for reinstatement, renewal or variance thereof, the disclosure of which would be an unreasonable invasion of the applicant's personal privacy;

(c) information concerning an annual declaration or accompanying information provided by a licensee under section 6-60, the disclosure of which would be an unreasonable invasion of the licensee's personal privacy;

(d) information concerning a complaint or report against, or an investigation, competence assessment or capacity evaluation of, any individual under Divisions 6, 11, 12 or 13 of Part 3 of the Act, the disclosure of which would be an unreasonable invasion of the individual's personal privacy;

(e) information concerning a quality assurance assessment of a licensee under Division 8 of Part 3 of the Act, or the licensee's compliance with quality assurance requirements established under Part 11, the disclosure of which would be an unreasonable invasion of the licensee's personal privacy;

(f) information the disclosure of which may prejudice the interests of any person involved in

(i) a proceeding under the Act, including a disciplinary proceeding under Divisions 15 to 17 of Part 3 of the Act or a review under Part 6 of the Act, or

(ii) any other criminal, civil or administrative proceeding;

(g) information concerning education programs or certified practice courses, including any information described in section 5-11;

(h) personnel matters;

(i) property acquisitions or dispositions;

(j) information concerning the contents, scoring or results of examination, a report to the licence committee under section 6-15(4) or a request for approval to take an examination again under section 6-15(7);

(k) communications with the Office of the Ombudsperson;

(l) communications to or from legal counsel, or any other matter that is subject to legal professional privilege or litigation privilege;

(m) information the college would be required or authorized to refuse to disclose in response to an access request under Part 2 of FIPPA;

(n) information the college is otherwise required by law to keep confidential.

(4) The board may convene a closed or *in camera* meeting for educational purposes or purposes that do not involve the exercise of powers or performance of duties under the Act.

Board meeting decision-making procedures

2-10 (1) A majority of the board members constitutes a quorum.

(2) Any board member, including the board chair, may move or propose a resolution.

(3) No resolution proposed at a board meeting need be seconded.

(4) The board must

(a) establish a *Consensus Decision Policy* to promote and establish procedures for consensus-based decision-making by the board, and

(b) apply the procedures in the *Consensus Decision Policy* for any decision to which those procedures apply.

(5) Where consensus cannot reasonably be achieved, or where delay would be contrary to the public interest or effective governance, the board chair may direct that a question before the board be decided by vote in accordance with these bylaws.

(6) A resolution approved in accordance with the *Consensus Decision Policy* or, subject to subsection (7), by majority vote of the board members attending a board meeting is a resolution of the board.

(7) In the event of a tie vote on a matter to which the procedures in the *Consensus Decision Policy* do not apply, the board chair does not have a second vote and the resolution does not pass.

(8) The board may request or direct the registrar to appoint advisory working groups to assist it with respect to any matter.

Board resolutions approved in writing

2-11 A majority of all board members may approve a resolution in writing, including by mail, facsimile or e-mail, and such an approved resolution has the same effect as if it were approved at a board meeting.

Minutes of board meetings

2-12 (1) The registrar must ensure that minutes are taken at each board meeting.

(2) The board chair must ensure that minutes are taken for any part of a closed or *in camera* meeting from which the registrar is excluded.

(3) Resolutions approved in writing under section 2-11 must be included in the minutes of the following board meeting.

(4) The registrar must publish the minutes of each board meeting on the college website with the exception of information discussed and decisions made during closed or *in camera* portions of meetings.

(5) Where a meeting is closed or held *in camera* in whole or in part, the registrar must include the reason for excluding the public in the minutes published on the college website.

Conflict of interest – board members

2-13 (1) If a board member believes that they may have a conflict of interest in relation to a matter before the board, or if the board is satisfied that a board member may have such a conflict of interest, the board member must

(a) as soon as reasonably practicable disclose the general nature of the conflict of interest to the other board members, and

(b) follow the directions issued by the board.

(2) When a board member discloses a conflict of interest,

(a) the registrar must

(i) record the disclosure in the relevant board meeting minutes, or

(ii) make a separate record of the disclosure and maintain it with the college records, and

(b) without limiting the board's discretion to take any additional measures under subsection (3), the remaining board members may determine whether the disclosing board member should be disqualified from participating in any meeting, in whole or in part, in which the matter in relation to which they have a conflict of interest will be addressed.

(3) The board may take measures that it considers necessary or appropriate to manage conflicts of interest disclosed by board members in a manner that maintains the integrity of college operations, including but not limited to issuing directions to disclosing board members

(a) to refrain from discussing, voting on, or taking any action with respect to any matter in relation to which they may have a conflict of interest,

(b) to remove themselves from portions of board meetings that are scheduled to address the matter in relation to which they may have a conflict of interest, and

(c) to refrain from attempting to exert any influence with respect to the matter in relation to which they may have a conflict of interest.

(4) The board must not presume that any board member has a conflict of interest solely because of the board member's Indigenous identity, race, colour, ancestry, place of origin, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity or expression, or age.

(5) Without limiting subsection (4), the board must not presume that an Indigenous board member has a conflict of interest in relation to a matter before the board

solely because the matter involves an Indigenous component, or solely because the board member's views on the matter may or will be influenced by the board member's Indigenous worldview, values or perspective.

(6) The board must establish a *Conflict of Interest Policy for Board and Committee Members* to provide further guidance for the identification and management of conflicts of interest for board and committee members.

Board rules, procedures and policies

2-14 (1) The board may establish or adopt rules, policies and procedures consistent with the Act, the regulations and the bylaws

(a) to establish or provide further guidance relating to the board's processes, or the roles and responsibilities of board members,

(b) to establish procedures or criteria in relation to the registrar, committee members and professional standards advisors by which the board may

(i) establish qualifications for those positions,

(ii) seek and evaluate candidates for those positions,

(iii) make appointments for those positions,

(iv) evaluate or assess the performance of individuals in those positions, and

(v) rescind appointments for those positions, or

(c) to provide guidance to board members or the public respecting any matter for which the board may or must exercise powers or perform duties.

(2) Subject to section 358 of the Act, the board may establish or adopt rules, policies and procedures consistent with the Act, the regulations and the bylaws, respecting how persons who act for the college may or must exercise powers or perform duties.

Bylaw making powers

2-15 (1) The board may direct the registrar to provide a list of persons who are qualified to provide advice as professional standard advisors when consulting on proposed bylaws respecting eligibility standards, ethics standards and practice standards, in addition to any such persons who have been appointed as members of the licence committee under section 3-2 or as members of the professional standards advisory committee under section 3-5.

(2) Before making or amending a bylaw, the board must do the following during a consultation period determined under subsection (3) for the purpose of the consultations required by section 384(2) of the Act:

(a) for the purpose of consulting with persons affected by the proposed bylaw and the public, the board must direct the registrar to post the proposed bylaw on the college website together with a brief description of the proposed bylaw and an invitation to provide comments;

(b) for the purpose of consulting with other regulators, the board must direct the registrar to deliver the proposed bylaw to specified regulators together with an invitation to provide comments;

(c) for the purpose of any required consultation with persons nominated by Indigenous governing bodies or other entities representing Indigenous peoples under section 384(2)(c) of the Act, the board must direct the registrar

(i) to deliver the proposed bylaw to such persons together with an invitation to provide comments, and

(ii) to take any measures considered necessary or appropriate to cooperate or collaborate with such persons and to facilitate their ability to provide meaningful feedback on the proposed bylaw.

(3) The consultation period for a proposed bylaw is 45 days, unless the board directs a different consultation period, which may be shorter or longer than 45 days.

(4) The board must, in collaboration with Indigenous governing bodies and other entities representing Indigenous peoples, establish policies and procedures for the nomination of persons by those governing bodies or entities for the purpose of any required consultation under section 384(2)(c) of the Act.

(5) The board may establish or adopt policies and procedures consistent with the Act, the regulations and these bylaws to provide further guidance for the conduct of consultations required under section 384(2) of the Act and subsection (2).

Recommendations to the superintendent

2-16 The board may make recommendations to the superintendent respecting criteria and procedures for

(a) the appointment of board members,

(b) the rescindment of appointments of board members, and

(c) the qualifications, competencies, and diversity of perspectives and lived experiences, of persons appointed, or to be appointed, as board members.

PART 3 - COMMITTEES

Committees established

3-1 (1) The following regulatory committees are established:

(a) the licence committee;

(b) the investigation committee;

(c) the education program review committee;

(d) the professional standards advisory committee.

(2) The following board support committees are established:

(a) the finance and audit committee;

(b) the governance committee;

(c) the registrar oversight committee.

(3) Subject to the Act, the regulations and the bylaws,

(a) each regulatory committee must set its own terms of reference, and

(b) the board must set terms of reference for each board support committee.

Licence committee composition

3-2 (1) Subject to subsections (2) to (5) and section 3-10(7), the licence committee consists of at least 15 persons appointed by the board, and must include

(a) at least five public representatives, and

(b) at least ten licensees, including at least two licensees in each of the following classes:

(i) practising LPN licensees;

(ii) practising RPN licensees;

(iii) practising RN licensees;

(iv) practising NP licensees;

(v) practising midwife licensees.

(2) The members of the licence committee appointed under subsection (1) must include persons who are appointed as professional standards advisors under section 359(1)(b) of the Act, including at least two professional standards advisors qualified to provide advice under section 361 of the Act with respect to eligibility standards for each of the following:

(a) for eligibility for the classes of LPN licences;

(b) for eligibility for the classes of RPN licences;

(c) for eligibility for the classes of RN licences;

(d) for eligibility for the classes of NP licences;

(e) for eligibility for the classes of midwife licences.

(3) For greater certainty, the same licence committee member or members may satisfy requirements for professional standards advisors with qualifications described in two or more different paragraphs of subsection (2).

(4) The number of public representatives on the licence committee must constitute at least one-third of the total number of persons on the committee.

(5) The number of licensees on the licence committee must constitute at least one-half of the total number of persons on the committee.

Investigation committee composition

3-3 (1) Subject to subsections (2) and (3) and section 3-10(7), the investigation committee consists of at least 15 persons appointed by the board, and must include

(a) at least five public representatives, and

(b) at least ten licensees, including at least two licensees in each of the following classes:

(i) practising LPN licensees;

(ii) practising RPN licensees;

(iii) practising RN licensees;

(iv) practising NP licensees;

(v) practising midwife licensees.

(2) The number of public representatives on the investigation committee must constitute at least one-third of the total number of persons on the committee.

(3) The number of licensees on the investigation committee must constitute at least one-half of the total number of persons on the committee.

Education program review committee composition

3-4 (1) Subject to subsection (2) and section 3-10(7), the education program review committee consists of at least nine persons appointed by the board, and must include

(a) at least three public representatives, and

(b) at least five licensees, including at least one licensee in each of the following classes:

(i) practising LPN licensees;

(ii) practising RPN licensees;

(iii) practising RN licensees;

(iv) practising NP licensees;

(v) practising midwife licensees.

(2) The number of public representatives on the education program review committee must constitute at least one-third of the total number of persons on the committee.

Professional standards advisory committee composition

3-5 (1) Subject to subsections (2) to (5) and section 3-10(7), the professional standards advisory committee consists of at least 12 members appointed by the board, and must include

(a) at least five public representatives, and

(b) at least ten licensees, including at least two licensees in each of the following classes:

(i) practising LPN licensees;

(ii) practising RPN licensees;

(iii) practising RN licensees;

(iv) practising NP licensees;

(v) practising midwife licensees.

(2) The members of the professional standards advisory committee appointed under subsection (1) must include persons who are also appointed as professional standards advisors under section 359(1)(b) of the Act, including all of the following:

(a) at least two professional standards advisors qualified to give advice under section 361 of the Act with respect to ethics standards;

(b) at least two professional standards advisors qualified to give advice under section 361 of the Act with respect to practice standards for each of the following:

(i) for the practice of the designated health profession of practical nursing;

(ii) for the practice of the designated health profession of psychiatric nursing;

(iii) for the practice of the designated health profession of nursing as a registered nurse;

(iv) for the practice of the designated health profession of nursing as a nurse practitioner;

(v) for the practice of the designated health profession of midwifery.

(3) For greater certainty, the same professional standards advisory committee member or members may satisfy requirements for professional standards advisors with qualifications described in two or more different paragraphs or subparagraphs of subsection (2).

(4) The number of public representatives on the professional standards advisory committee must constitute at least one-third of the total number of persons on the committee.

(5) The number of licensees on the professional standards advisory committee must constitute at least one-half of the total number of persons on the committee.

Finance and audit committee composition

3-6 The finance and audit committee consists of at least three members appointed by the board, and must include

(a) at least one board member who is a public representative, and

(b) at least one board member who is a licensee.

Governance committee composition

3-7 The governance committee consists of at least three members appointed by the board, and must include at least one board member who is a public representative.

Registrar oversight committee composition

3-8 The registrar oversight committee consists of three board members appointed by the board, and must include

(a) at least one of the board chair or board vice-chair,

(b) at least one public representative, and

(c) at least one licensee.

Advisory working groups

3-9 (1) Subject to the Act, the regulations and the bylaws, the registrar may appoint advisory working groups for such purposes as the registrar considers necessary or appropriate.

(2) The registrar must determine the composition of, and terms of reference for, advisory working groups.

(3) The registrar may dissolve an advisory working group at any time.

Committee membership

3-10 (1) Every member of a regulatory committee or board support committee must be appointed for a term of office specified by the board not exceeding three years.

(2) Subject to subsection (9) and any other applicable requirements for the composition of committees established under the bylaws, the members and former members of a committee are eligible for reappointment to the committee at any time.

(3) The board must ensure

(a) that every person appointed to a committee possesses the education, training, experience and other qualifications that the board considers necessary to ensure the appointee's ability to exercise the powers and fulfill

the duties assigned to them effectively and in accordance with the guiding principles in section 14 of the Act, and

(b) that the members of a committee collectively possess, amongst themselves, the education, training, experience and other qualifications that the board considers necessary to ensure the committee's ability to exercise its powers and fulfill its duties effectively and in accordance with the guiding principles in section 14 of the Act.

(4) When appointing members of a regulatory committee, the board must make reasonable efforts to ensure the appointments provide a range of perspectives, including the perspectives of Indigenous persons and persons from equity-denied communities.

(5) Board members are not eligible to serve on any regulatory committee.

(6) The board may establish policies

(a) making

(i) former practising licensees, or

(ii) non-practising midwife licensees

who meet specified criteria eligible to serve as members of some or all the college's regulatory committees, including panels of those committees, and

(b) specifying further criteria for appointment and rescindment of committee members that are consistent with the Act, the regulations and the bylaws.

(7) A former practising licensee or a non-practising midwife licensee who is appointed as a regulatory committee member in accordance with a board policy established under subsection (6)(a) is deemed to fill a position of a practising licensee in the corresponding class of licensure under section 3-2(1)(b), 3-3(1)(b), 3-4(1)(b) or 3-5(1)(b), as the case may be.

(8) A member of a regulatory committee or board support committee ceases to hold membership on the committee

(a) upon expiration of their term,

(b) if they deliver a written notice of resignation to the registrar, upon the effective date specified in the notice or, if no effective date is specified, upon receipt of the notice by the registrar,

(c) upon the committee member ceasing to meet applicable eligibility requirements under the bylaws for the position for which they were appointed,

(d) upon their death,

(e) upon their removal from the committee by the registrar for repeated failure to attend committee meetings or to communicate with the college, in accordance with applicable criteria specified in a policy established under subsection (6)(b), or

(f) upon their removal from the committee by the board applying the procedures in the *Consensus Decision Policy* or, if those procedures do not apply, by majority vote.

(9) A member of a regulatory committee or board support committee who

(a) completes six consecutive years of serving as a member of a committee, or

(b) ceases to hold office as a committee member under subsection (8)(b), (e) or (f),

is not eligible for reappointment to the committee for at least one year unless the board is satisfied there are extenuating circumstances, including any public interest in retaining the knowledge, experience and perspective of an Indigenous committee member or a committee member from another equity-denied community.

Committee chair and committee vice-chair

3-11 (1) The board may appoint a committee chair and one or more committee vice-chairs for each regulatory committee and board support committee from among the members of the committee.

(2) In the absence of appointments by the board under subsection (1), the members of a committee must appoint a committee chair and at least one committee vice chair from among the members of the committee by applying the procedures in the *Consensus Decision Policy* or, if those procedures do not apply, by majority vote.

(3) A committee chair or vice-chair appointed under subsection (1) or (2) holds office for a term of one year, unless the board or the members of the committee appointing the chair or vice-chair specify a different term of office.

(4) A committee chair or committee vice-chair ceases to hold office as committee chair or committee vice-chair

(a) upon expiration of their term under subsection (3),

(b) upon ceasing to be a committee member,

(c) if they deliver a written notice of resignation from the position of chair or vice-chair to the registrar, upon the effective date specified in the notice or, if no effective date is specified, upon receipt of the notice by the registrar,

(d) upon their death, or

(e) upon their removal from the position of committee chair or committee vice-chair

(i) by the board, applying the procedures in the *Consensus Decision Policy* or, if those procedures do not apply, by majority vote, where the committee chair or committee vice-chair was appointed by the board under subsection (1), or

(ii) by the board or the committee, applying the procedures in the *Consensus Decision Policy* or, if those procedures do not apply, by

majority vote, where the committee chair or committee vice-chair was appointed by the committee under subsection (2).

(5) If a committee chair or all committee vice-chairs of any committee ceases to hold office, the board or the committee must appoint another committee chair or committee vice-chair as soon as reasonably practicable under subsection (1) or (2).

Power and duties of a committee chair and committee vice-chair

3-12 (1) A committee chair

(a) must preside at all meetings of the committee, except as provided in section 3-15(2),

(b) must fulfill duties under the Act, the regulations and the bylaws,

(c) may exercise powers and must perform duties delegated by the committee, and

(d) must report to the board in a form and at a time as directed by the board.

(2) If the committee chair is absent or unable to act for any reason, a committee vice-chair may exercise the powers and must perform the duties of the committee chair.

(3) If the committee chair and all committee vice-chairs are absent or unable to act for any reason, the committee must select an acting chair by applying the procedures in the *Consensus Decision Policy* or, if those procedures do not apply, by majority vote, to preside at the meeting and to exercise powers and perform duties of the committee chair, subject to any terms, limits or conditions the committee considers necessary or appropriate in the circumstances.

Committee and advisory working group member remuneration and expenses

3-13 Members of committees and advisory working groups are entitled to receive remuneration for time spent on college business and reimbursement for reasonable travel and other expenses necessarily incurred in performing college business as set out in Schedule A.

Committee rules, procedures and policies

3-14 A committee may adopt rules, policies and procedures consistent with the Act, the regulations and the bylaws

(a) to establish or provide guidance relating to the committee's processes, or the roles and responsibilities of committee members, or

(b) to provide guidance to committee members or the public respecting any matter for which the committee may or must exercise powers or perform duties.

Committee panels

3-15 (1) A regulatory committee may meet in panels appointed by the chair of the committee.

(2) When a chair of a committee appoints a panel under subsection (1), the chair of the committee

(a) must designate one of the panel members as panel chair to preside over meetings of the panel, and

(b) may designate one of the panel members as panel vice-chair to preside over meetings of the panel if the panel chair is absent or unable to act for any reason.

(3) Subject to subsection (4), a panel must be comprised of at least three members of the committee.

(4) With the board's approval, the chair of the licence committee may appoint themselves or another committee member to act as a single-member panel of the licence committee for a specified purpose.

(5) At least one-third of the members of a panel of the licence committee or investigation committee must be public representatives, other than a single-member panel of the licence committee appointed under subsection (4).

(6) At least one member of a panel of the education program review committee or the professional standards advisory committee must be a public representative.

(7) When appointing members of a panel of a committee, the chair of the committee

(a) must ensure that the panel includes at least one licensee from a particular designated health profession or class of licensees, if, in the opinion of the committee chair, the expertise of such an individual will be reasonably required for the purpose of any matter to be considered by the panel, and

(b) must make reasonable efforts to ensure the appointments provide for the perspectives of Indigenous persons or persons from equity-denied communities if those perspectives may be relevant to the matters to be considered by the panel.

(8) Without limiting subsection (7)(b), when the chair of the investigation committee appoints members of a panel of that committee for the purpose of considering a matter in which the complainant, the respondent or both are Indigenous persons, the committee chair must make reasonable efforts to ensure that at least one-half of the panel consists of Indigenous persons.

(9) When the chair of the licence committee appoints a panel of that committee for the purpose of advising the board under section 361 of the Act with respect to eligibility standards, the committee chair must ensure that the panel includes at least one professional standards advisor who is qualified to give advice with respect to each applicable matter described in section 3-2(2).

(10) When the chair of the professional standards advisory committee appoints a panel of that committee for the purpose of advising the board under section 361 of the Act with respect to ethics standards or practice standards, the committee chair must ensure that the panel includes at least one professional standards advisor

who is qualified to give advice with respect to each applicable matter described in section 3-5(2).

(11) A member of a committee may be appointed concurrently to more than one panel of the committee.

(12) Subject to subsection (13) and any applicable rules, policies or procedures adopted by the committee, a panel of a committee may exercise any power, duty or function of the committee, except the power to appoint a panel.

(13) A single-member panel of the licence committee may only exercise powers, duties or functions of the licence committee for the specified purpose for which that panel was appointed under subsection (4).

(14) If a panel consists of three members, all members of the panel constitute a quorum.

(15) If a panel consists of four or more members, a majority of the panel constitutes a quorum, provided that

(a) at least one-third of the panel members in attendance are public representatives, in the case of a panel of the licence committee or the investigation committee, or

(b) at least one of the panel members in attendance is a public representative, in the case of a panel of the education program review committee or the professional standards advisory committee.

Committee and panel meetings

3-16 (1) A committee or panel may meet and conduct business in person, by telephone, by video conference, or by any other method of communication that allows all committee or panel members in attendance to interact with each other, or in hybrid manner.

(2) Subject to the regulations and the bylaws, committee and panel meetings are not open to the public, including licensees who are not members of the panel.

(3) Despite subsection (2), a committee or panel may invite any person to attend all or part of a meeting if the committee or panel considers that person's participation to be reasonably required for the purpose of any matter to be considered by the committee or panel.

(4) Subject to section 3-15(12) to (15), a majority of the members of a committee constitutes a quorum.

(5) Sections 2-10(2), (3) and (5) to (7), 2-11, 2-12(1) and (3) and 2-13(1) to (5) apply to each committee and panel as if it were the board, with any necessary changes.

(6) A committee must submit an annual report of its activities to the board in a form and at a time as directed by the board.

PART 4 - COLLEGE ADMINISTRATION

Registrar and chief executive officer

4-1 (1) The registrar

(a) is the chief executive officer of the college and holds final responsibility for all administrative and operational matters for the college, and

(b) has the powers and duties assigned to the position of registrar under the Act, the regulations and the bylaws.

(2) For greater certainty, unless otherwise provided by the Act, the regulations, the bylaws or board-approved policies, the registrar has exclusive authority over and accountability for the day-to-day administration and operations of the college, including the management of employees, contractors, and operational decision-making.

(3) The registrar may designate an officer, employee or agent of the college to exercise any power or perform any duty of the registrar assigned by the registrar.

(4) An officer, employee or agent of the college referred to in subsection (3) has the same authority as the registrar when the officer, employee or agent is acting on behalf of the registrar, subject to the direction of the registrar.

(5) The registrar is authorized to establish forms for the purposes of the bylaws, and to require the use of such forms by applicants and licensees.

(6) The registrar may appoint an employee or contractor whose role is to assist with reconciliation initiatives by the college, including initiatives relating to

(a) reconciliation with Indigenous peoples and the implementation of the *United Nations Declaration of the Rights of Indigenous Peoples* and the *Declaration on the Rights of Indigenous Peoples Act*,

(b) developing and implementing policies designed to increase the number of Indigenous persons who are employed or retained by the college, and

(c) enhancing cultural safety for Indigenous licensees and Indigenous clients of licensees, including through preventing and mitigating systemic challenges and advancing anti-racism, anti-discrimination and anti-colonialism measures.

(7) For the purposes of sections 6-24, 6-30, 6-40, 6-46 and 6-51, the registrar may do any of the following:

(a) declare an emergency situation;

(b) set the period for which such declaration is to be in effect;

(c) extend the effective period the declaration any number of times;

(d) rescind the declaration at any time.

Deputy registrars

4-2 A deputy registrar appointed under section 360(1) or (2) of the Act is authorized to exercise all powers and perform all duties of the registrar

(a) subject to the direction of the registrar, and

(b) without limitation, if the registrar has a conflict or interest or is otherwise unable to act or provide direction for any reason.

Legal counsel

4-3 (1) The registrar may retain legal counsel to advise the college, committee or panel or to otherwise assist the board, a committee, panel or working group, the registrar, or any other officer, employee or agent of the college on any college matter.

(2) The board may retain legal counsel to advise or assist the board on any college matter.

Fiscal year

4-4 (1) The fiscal year of the college ends on December 31 in each year.

(2) The board must do the following, at least once in each fiscal year, having regard to any applicable advice provided by the finance and audit committee under section 4-5:

(a) approve an operating budget and a capital budget and corresponding fees for the fiscal year;

(b) set any limits or conditions the board considers necessary or appropriate on the registrar's authority to make financial commitments on behalf of the college during the fiscal year;

(c) establish contingency reserve funds and limits and conditions for the permissible uses of such funds.

Finance and audit committee

4-5 The finance and audit committee must

(a) advise the board on the needs of the college in regard to financial administration and the financial implications of board decisions,

(b) advise the board on the application of legislative, regulatory and other financial requirements to the college,

(c) recommend, for the approval of the board, financial policies essential to the financial administration of the college,

(d) advise the board on financial risk management and audit issues related to the administration of the college,

(e) review and report to the board on any financial administration, financial risk management or audit matter referred to it by the board, and

(f) serve as a resource to the board in matters pertaining to college financial administration, financial risk management and audit.

Banking, borrowing and investments

4-6 (1) The registrar must establish and maintain such accounts, in the name of the college, with a chartered bank, trust company, or credit union, as the board may direct from time to time.

(2) The registrar may raise money or guarantee or secure the payment of money, in the name of the college, in any manner the board may direct from time to time, to carry out the purposes of the college.

(3) The registrar may invest funds of the college, in the name of the college, in a manner consistent with sections 15.1 and 15.2 of the *Trustee Act* and in accordance with any investment policy the board may direct from time to time.

Auditor

4-7 (1) The board must appoint a chartered professional accountant as the auditor for the college.

(2) The board must, for each fiscal year, direct the auditor to conduct an audit of the college's financial statements.

(3) The registrar must submit the college's financial statements to the auditor not later than 60 days after the end of each fiscal year.

(4) A copy of the auditor's report must be included in the college's annual report.

Conflict of interest - employees

4-8 (1) If an officer, employee or agent of the college believes that they may have a conflict of interest in relation to a college matter, or if the registrar is satisfied that an officer, employee or agent of the college may have such a conflict of interest, the officer, employee or agent must

(a) as soon as reasonably practicable disclose the general nature of the conflict of interest to the registrar, or to a responsible supervisor the registrar may designate from time to time, and

(b) follow the directions issued by the registrar or responsible supervisor.

(2) When an officer, employee or agent of the college discloses a conflict of interest in relation to a college matter, the registrar or responsible supervisor must determine whether the officer, employee or agent should be directed to refrain from any further participation in that matter.

(3) If the registrar or responsible supervisor determines that an officer, employee or agent of the college has a conflict of interest in relation to a college matter, the registrar or responsible supervisor must take measures they consider necessary

and appropriate to manage the conflict of interest in a manner that maintains the integrity of college operations, including but not limited to

(a) providing a written report to the board chair regarding the conflict of interest, their assessment of it, and any measures taken to address it, and

(b) directing the officer, employee or agent of the college

(i) to refrain from having any involvement in the matter,

(ii) to remove themselves from any meetings in which the matter is considered, and

(iii) to refrain from attempting to exert any influence with respect to the matter.

(4) The registrar or responsible supervisor must not presume that any officer, employee or agent of the college has a conflict of interest solely because of the officer, employee or agent's Indigenous identity, race, colour, ancestry, place of origin, religion, marital status, family status, physical or mental disability, sex, sexual orientation, gender identity or expression, or age.

(5) Without limiting subsection (4), the registrar or responsible supervisor must not presume that an Indigenous officer, employee or agent of the college has a conflict of interest in relation to a college matter solely because the matter involves an Indigenous component, or solely because the officer, employee or agent's views on the matter may or will be influenced by their Indigenous worldview, values or perspective.

(6) If the registrar believes that they may have a conflict of interest in relation to a college matter, the registrar must disclose it as soon as reasonably practicable to the board chair who must

(a) determine if the registrar should be directed to refrain from any further involvement in the matter, and

(b) perform the duties of the registrar or responsible supervisor under subsection (3).

(7) The board must establish a *Conflict of Interest Policy for College Employees* to provide further guidance for the identification and management of conflicts of interest for officers, employees and agents of the college.

Indemnification

4-9 (1) Subject to subsection (2), the college must indemnify and save harmless

(a) its current and former board members, committee members, officers and employees, and

(b) other individuals engaged by the college to exercise a power or perform a duty under the Act or bylaws on the college's behalf,

from and against any and all liability, fines, damages, costs, charges and expenses whatsoever that they, or any of them, may sustain or incur in any way relating to or arising out of any claim against any of them by reason of their

(c) having been a board member, committee member, officer or employee of the college, or

(d) exercising a power or performing a duty under the Act or bylaws on the college's behalf.

(2) The college will not indemnify or save harmless any person referred to in subsection (1)(a) or (b)

(a) for costs, charges or expenses that were not actually and reasonably incurred by that person,

(b) if, in relation to the applicable claim, that person did not act honestly and in good faith with a view to the best interests of the college,

(c) if, in relation to a claim other than a civil proceeding, that person did not have reasonable grounds for believing that their conduct was lawful,

(d) if that person makes an admission or liability or guilt or enters into a settlement of the claim without the college's consent, such consent not to be unreasonably withheld, to the extent that any liability, fines, damages, costs, charges or expenses are incurred as a result of that admission or settlement,

(e) for any amount for which that person has received, or is entitled to receive, indemnification from the government of British Columbia,

(f) for any amount of a claim that is otherwise covered by liability protection or insurance, or

(g) for any amount for which the college is prohibited from providing indemnification or payment under any applicable law.

PART 5 - COLLEGE RECORDS AND INFORMATION

Freedom of Information and Protection of Privacy Act

5-1 (1) The registrar is the head of the college for the purposes of FIPPA.

(2) The registrar may authorize a deputy registrar or another officer, employee, agent or contractor of the college to exercise any power or perform any duty of the registrar under FIPPA.

(3) The board must ensure that the registrar performs the registrar's duties under FIPPA.

(4) The registrar must deliver a report to the board regarding the steps taken to comply with FIPPA in a form and at a time directed by the board.

Fees for access requests

5-2 Subject to section 75 of FIPPA, the college may charge the fees set out in section 13 and Schedule 1 of the *Freedom of Information and Protection of Privacy Regulation*, B.C. Reg. 155/2012 for processing and responding to requests for access to records.

Protection of personal information

5-3 (1) The registrar must take reasonable steps to ensure the college's collection, protection, use, disclosure, and retention of personal information complies with Part 3 of FIPPA, subject to section 102(3)(b) of the Act.

(2) The registrar must take reasonable steps to ensure that

(a) if personal information is sent to any person or service provider for processing, storage or destruction, a contract is made with that person or service provider that includes an undertaking by the person or service provider that the confidentiality of that personal information will be maintained, and

(b) all service providers to whom the college provides personal information are informed of their obligation to comply with Part 3 of FIPPA.

Disposal of records containing personal information

5-4 When the college disposes of a record containing personal information, the registrar must ensure that

(a) in the case of information recorded electronically, the college disposes of it by erasing or destroying the information securely and in a manner that ensures it cannot be reconstructed, and

(b) in the case of a physical record, the college

(i) effectively destroys the record, by use of a shredding device or in another manner that ensures the record cannot be reconstructed,

(ii) transfers the record to the person whose information is contained in it, or

(iii) transfers the record to the licensee who compiled the information in it.

Retention of records

5-5 (1) Subject to subsections (2) to (4), the board, or, if authorized by the board, the registrar may establish policies and procedures for record management and retention that comply with the Act, the regulations, the bylaws, FIPPA, and other applicable laws.

(2) The college must retain the disciplinary and capacity records required by section 390 of the Act for each current or former licensee, in physical or electronic form, during the lifetime of the current or former licensee.

(3) Except as otherwise required by law and subject to subsection (2), the college must retain all records related to the activities of investigators, the investigation committee and its panels, or persons acting on behalf of the investigation committee or its panels in respect of the investigation and disposition of complaints, for at least 16 years after the later of

(a) the date an investigation is concluded, or

(b) the date the complainant or other materially affected third party in the matter, if any, reaches 19 years of age.

(4) The college must retain the following records permanently, in physical or electronic form:

(a) the minutes of board meetings, together with all supporting records submitted for each board meeting;

(b) annual reports made under section 398 of the Act.

Confidentiality of regulatory information

5-6 (1) Without limiting any requirement to maintain the confidentiality of quality assurance information or other protected information under section 102 or 243 of the Act, a person acting on the college's behalf must preserve confidentiality with respect to all knowledge gained and all information and records obtained in the exercise of powers or performance of duties under the Act, regulations or bylaws, unless disclosure is

(a) necessary to exercise the power or perform the duty,

(b) authorized by the board as being in the public interest,

(c) otherwise authorized or required under the Act, regulations or bylaws, or

(d) required under another enactment.

(2) The board may delegate the exercise of its power under subsection (1)(b) to the registrar or a deputy registrar, subject to any terms, limits or conditions the board considers necessary or appropriate.

Registry

5-7 (1) The college must maintain its registry in an electronic format.

(2) For greater certainty, the power of the board or registrar under section 5-5(1) to establish or adopt policies and procedures relating to records includes the registry.

(3) In addition to the information that must be included in the registry under sections 55 and 249 of the Act and section 20 of the HPOR, the registrar must identify in the registry, under a licensee's name, the following information:

(a) a statement that the person is or is not authorized to practise as a nurse or midwife in British Columbia, as the case may be;

(b) in respect of licensees in each class of multijurisdictional licensees, a notation specifying

(i) each other Canadian jurisdiction in which the person is registered or licensed as the equivalent of a practising licensee in the corresponding class of practising licensees,

(ii) each governing body with or by which the person is registered or licensed as described in subparagraph (i), and

(iii) the name or description of the class or type of registration or licensure held by the person with each governing body referred to in subparagraph (ii);

(c) in respect of a licensee whose business contact information under section 55(1)(a) of the Act is that of an employer, the name of the employer;

(d) effective on and after the date specified by ordinary resolution of the board for the purpose of this paragraph, a unique identification number assigned to the licensee by the college;

(e) the date on which the licensee was first granted licensure or registration, and a notation of each grant, expiry, revocation or cancellation of licensure or registration in each applicable class, regardless of whether it occurred before, on or after the HPOA effective date;

(f) a notation of each grant, expiry or revocation of certification in a certification program established under Part 7, and the period for which the licensee is or was certified to perform restricted activities under the applicable certification program;

(g) a notation of each certified practice designation or midwife specialized practice certification granted or cancelled under the former Act, and the periods for which it was valid;

(h) in respect of a practising RPN licensee, multijurisdictional RPN licensee, practising RN licensee, multijurisdictional RN licensee, practising NP licensee, provisional NP licensee, practising midwife licensee or provisional midwife licensee, a notation indicating whether or not the licensee is assigned a Medical Services Plan practitioner number and authorized to independently make referrals for medical or diagnostic services in accordance with the applicable practice standards;

(i) in respect of a practising RN licensee, multijurisdictional RN licensee, practising NP licensee or provisional NP licensee, a notation indicating whether or not the licensee is authorized to independently prescribe Schedule I or IA drugs as contemplated by section 23(2) of the NMR, for purposes in addition to those for which practising RN licensees are generally authorized to independently prescribe Schedule I drugs under section 19(1) of the NMR;

(j) in respect of a practising RPN licensee or multijurisdictional RPN licensee, a notation indicating whether or not the licensee is authorized to independently prescribe Schedule I or IA drugs as contemplated by section 53(b) of the NMR, for purposes in addition to those for which practising RPN licensees are generally authorized to independently prescribe Schedule I drugs under section 49(1) of the NMR;

(k) in respect of a practising midwife licensee or provisional midwife licensee,

(i) a notation of each hospital for which the licensee holds a valid permit, issued by the hospital's board, to practise in the hospital, and

(ii) any additional information required by licence committee policy respecting the practice privileges authorized by a permit under subparagraph (i);

(l) any public notice relating to the licensee published under section 255 or 256 of the Act or section 39.3 of the former Act.

(4) For the purposes of section 396(2)(b) of the Act, the registrar may refuse access to information kept in the registry if the registrar reasonably believes that the access could threaten the safety of a licensee or an affected third party.

Unauthorized practice information

5-8 The registrar may publish on the college's website, or may make publicly accessible by other means, the following information:

(a) information respecting a person whom the registrar reasonably believes to have engaged in unauthorized practice contrary to section 29 of the Act;

(b) information respecting a person whom the registrar reasonably believes to have engaged in unauthorized use of title contrary to section 30 of the Act;

(c) information respecting a person whom the registrar reasonably believes to have provided false or misleading information to the public contrary to section 34 of the Act;

(d) a statement that a person described in paragraph (a), (b) or (c)

(i) is not authorized to practise in British Columbia, and

(ii) is not authorized to use any title that may be used exclusively by one or more classes of licensees in association with the person's work in British Columbia.

Disclosure of licensure status and contact information

5-9 (1) If the college receives an inquiry about a person's licensure status, the registrar must disclose

(a) whether or not the person is a licensee or a former licensee,

(b) any other information respecting the person that is set out in the registry as of the date the inquiry is made, if the person is a licensee or a former licensee, unless access to that information is refused under section 396(2) of the Act or section 5-7(4), and

(c) any information respecting the person that has been published or made publicly accessible under section 5-8.

(2) The registrar may disclose, to a corporation or other entity that provides professional liability protection or insurance coverage against liability for negligence in the provision of services that constitute the practice of nursing, practical nursing, psychiatric nursing or midwifery, any of the following information to enable a person who is a licensee or former licensee to be contacted by the corporation or entity:

(a) any information that would be disclosed under subsection (1) if an inquiry were made about the person's licensure status;

(b) any former names of the person and any names by which the person was previously known, as recorded in the college records;

(c) any unique identification numbers assigned to the person, as recorded in the college records;

(d) the most recent telephone number or fax number for the person that is recorded in the college records, if different from the person's business contact information described in section 55(1)(a) of the Act;

(e) the most recent physical address or mailing address for the person that is recorded in the college records, if different from the person's business contact information described in section 55(1)(a) of the Act;

(f) the most recent email address for the person that is recorded in the college records for the purpose of receiving communications from the college.

Disclosure required to protect the public

5-10 For greater certainty, a person who exercises a power or performs a duty under Part 3 or 5 of the Act may disclose information under section 243(1)(b) of the Act that if the registrar or the board determines that disclosure to be reasonably necessary to fulfill the person's duty to act in accordance with the principles described in section 14(2) and (3) of the Act, including the principle of protecting the public from harm and discrimination.

Disclosure of education program information

5-11 If the registrar considers it necessary for the exercise of the powers or the performance of the duties of a minister, officer or employee of a ministry of the government of British Columbia in relation to the approval, certification, licensing, registration, recognition or regulation of, or consent for, education programs or certified practice courses or post-

secondary institutions offering education programs or certified practice courses, the registrar may disclose to the minister, officer or employee

(a) any record or information that is or has been collected, created, developed or received by or for, or on behalf of, the college or the education program review committee in connection with or relevant to the exercise of the powers or the performance of the duties of that committee under sections 6-6, 6-7, 7-4 and 7-5, or

(b) any similar or equivalent record that was in the possession or under the control of the college before the HPOA effective date.

Disclosure of NP or midwife information to Health Canada

5-12 (1) In this section,

(a) "**conduct of an activity**", "**Federal Minister**", "**listed substance**", "**midwife**" and "**nurse practitioner**" have the same meanings as in section 12-34;

(b) "**request to consult**" means an inquiry by the Federal Minister under section 79(5)(a) of the *Benzodiazepines and Other Targeted Substances Regulations* (Canada), section G.04.004.2(5)(a) of the *Food and Drug Regulations* (Canada) or section 59(5)(a) of the *Narcotic Control Regulations* (Canada).

(2) The registrar may disclose to the Federal Minister, in response to a request to consult, information or records relating to a nurse practitioner's or midwife's conduct of an activity with a listed substance.

PART 6 - LICENSURE

Division 1 – Definitions and Publication of Requirements

Definitions

6-1 In this Part, the following definitions apply:

"equivalency determination" has the same meaning as in section 48 of the Act;

"evaluator" means an evaluator appointed by the licence committee under section 6-12;

"extrajurisdictional credentials" has the same meaning as in section 48 of the Act;

"supervised practice experience" means a practice experience described in section 6-61(1)(a)(ii), 6-62(1)(a)(i)(B), 6-63(1)(a)(i)(B), 6-64(1)(a)(ii) or 6-65(1)(a)(ii).

Publication of licence requirements

6-2 The policies and procedures published on the college website regarding eligibility requirements for licences, application processing periods, and any known factors likely to delay application processing, must also include

(a) the form and manner of delivery specified for the purpose of section 6-3, and

(b) the information, documentation and fees applicants for licensure are required to include in, or with, their application.

Division 2 – General Requirements for Licences

Licence applications

6-3 An applicant must provide a completed application to the registrar for the class of licensees for which the application is made in the specified form.

General eligibility standards

6-4 (1) Unless otherwise specified in the bylaws, an applicant for each class of licensees, including an applicant for reinstatement, must provide, or cause to be provided, the following to the college:

(a) information satisfactory to the college, including, without limitation, any reference letters, declarations or other information requested by the registrar, confirming that the applicant

(i) is of good character, and will practise the designated health profession for which the applicant is seeking licensure in an ethical manner, and

(ii) is fit to engage in the practise of the designated health profession for which the applicant is seeking licensure;

(b) information satisfactory to the college confirming that the applicant meets all other applicable eligibility standards for the class of licence applied for;

(c) a declaration by the applicant, in a form acceptable to the college, attesting to

(i) the truthfulness and completeness of the information submitted by the applicant in, or with, their application for licensure, and

(ii) the applicant's understanding of the consequences that may result from submitting false or incomplete information in, or with, an application for licensure;

(d) information satisfactory to the college confirming compliance with the applicable requirements for professional liability protection or liability insurance;

(e) a declaration by the applicant, in a form acceptable to the college,

(i) that the applicant has not, at any time, been refused an entitlement sought by the applicant to practise a profession in any jurisdiction, or specifying the particulars of any such refusal, and

(ii) specifying every entitlement to practise a profession that the applicant has, at any time, been granted in any jurisdiction;

(f) information, in a form satisfactory to the college, dated within 60 days of the date of application, from the extrajurisdictional regulator in each jurisdiction in which the applicant is, or was at any time, registered or licensed for the practice of a profession, confirming that

(i) the applicant's authority to practise the profession has not been revoked, suspended, limited, restricted, or subject to conditions in that jurisdiction at any time, or specifying particulars of any such revocation, suspension, limitation, restriction, or conditions,

(ii) the applicant is not the subject of a current proceeding, including any investigation, inquiry, review or appeal, that could result in the applicant's authority to practise the profession being revoked, suspended, limited, restricted, or subject to conditions in that jurisdiction, or specifying particulars of any such current proceeding, and

(iii) a proceeding was not commenced or completed because the applicant voluntarily relinquished their authority to practise a profession, or specifying particulars of any such proceeding;

(g) a criminal record check authorization or, if permitted by the registrar, a criminal record check verification authorization, in the form required under the *Criminal Records Review Act*;

(h) documentation in a form satisfactory to the college providing the results of a national police check or the equivalent for every jurisdiction in which the applicant resided during the five-year period immediately before the date of the application, unless it is not reasonably practicable to obtain such documentation for the applicable jurisdiction;

(i) a declaration by the applicant, in a form acceptable to the college, that the applicant is not the subject of any charge, investigation, inquiry, review or other proceeding that must be reported under section 6-18, or specifying the particulars of any such charge, investigation, inquiry, review or other

proceeding that has not been reported to the college previously and any new or changed information about such a previously reported charge, investigation, inquiry, review or other proceeding;

(j) information satisfactory to the college confirming that the applicant is a Canadian citizen, a permanent resident of Canada, or otherwise lawfully permitted to work in Canada;

(k) information satisfactory to the college confirming the applicant's English language proficiency;

(l) payment of any outstanding amount owed or owing by the applicant to the college;

(m) any applicable fees set out in Schedule G;

(n) information satisfactory to the college confirming the applicant's compliance with any applicable requirements for mandatory vaccinations against transmissible illnesses required by or under an enactment other than the bylaws;

(o) information satisfactory to the college confirming that the applicant has, within the ten-year period immediately preceding the date of application, either

(i) completed an education program in any jurisdiction that is relevant to the applicable class of licence applied for, or

(ii) engaged in some, more than minimal, practice of the applicable designated health profession or the equivalent in any jurisdiction,

unless the applicant provides other information that satisfies the registrar that the applicant has a reasonable prospect of demonstrating substantial equivalency of their knowledge, skills, ability and judgment through an equivalency determination under section 6-13;

(p) a declaration by the applicant, in a form acceptable to the college, of the applicant's employment status and the particulars of all the applicant's employers, and all positions held and the total number of hours of professional practise engaged in by the applicant in each position, whether paid or unpaid, during a ten-year period, or a shorter period specified by the registrar, immediately preceding the date of application;

(q) if applicable, the applicant's consent, in a form acceptable to the college, for information about the applicant to be disclosed to the college by any employer referred to in paragraph (p);

(r) the applicant's consent, in a form acceptable to the college, for information about the applicant to be disclosed by the college to an examination administrator or provider inside or outside Canada for the purpose of enabling the applicant's participation in an examination required to be taken under the bylaws;

(s) a declaration by the applicant, in a form acceptable to the college, of the particulars of all educational events, courses or programs relevant to a designated health profession, or a field related to a designated health profession, that the applicant completed during a ten-year period, or a

shorter period specified by the registrar, immediately preceding the date of application;

(t) all information or records about the applicant, including without limitation notarized copies of government-issued records or other reliable, independent source records, that the registrar requires reasonably in the circumstances for the purpose of

(i) verifying the applicant's identity and legal name,

(ii) preventing misidentification of applicants, licensees or other persons, or

(iii) managing access to, or protecting the integrity and security of, the college's records, information systems and online services;

(u) the applicant's business contact information, including a mailing address and telephone number, and a valid email address for the purpose of receiving communications from the college to the applicant, and all other personal contact or emergency contact information for the applicant that the registrar requires reasonably in the circumstances;

(v) any supplementary or supporting information or records about the applicant, and relevant to other information or another item required under the bylaws to be included in, or with, an application for licensure, that the college requires to be submitted in, or with, registration applications, generally or by class, from time to time.

(2) Unless otherwise specified in the bylaws, if an applicant for practising LPN licensure, practising RPN licensure or practising RN licensure

(a) did not graduate from a Canadian college-level or university-level education program offered as preparation for entry to practice in practical nursing, psychiatric nursing or nursing, or a corresponding health profession in another province of Canada, and

(b) has never been licensed or registered, in a province of Canada, to practise practical nursing, psychiatric nursing or nursing, or a corresponding health profession in another province of Canada,

the applicant must, in addition to providing the items required by subsection (1),

(c) provide to the college the applicant's consent, in a form acceptable to the licence committee, for information about the applicant to be disclosed inside or outside Canada for the purpose of enabling an assessment of substantial equivalency of the applicant's knowledge, skills, ability and judgment as contemplated under the bylaws, and

(d) cause to be provided to the college from a credentialing agency, body or organization recognized by the licence committee for the purpose of this subsection an advisory report acceptable to the licence committee verifying the applicant's identity and educational credentials.

(3) Subsection (1)(b) does not apply to a Canadian labour mobility applicant for practising licensure under section 6-5(1).

(4) Subsections (1)(e) to (k) and (n) to (s) and (2) do not apply to a provisional licensee or multijurisdictional licensee who is an applicant for the corresponding class of practising licensure under section 6-20(4), 6-26(4), 6-33(4), 6-43(4) or 6-48(4).

(5) Subsection (1)(k) does not apply to an applicant for reinstatement of practising licensure under section 6-21, 6-27, 6-34, 6-38, 6-44 or 6-49.

(6) Subsection (1)(e), (f) and (n) to (s) do not apply to an applicant for reinstatement of practising licensure under section 6-21, 6-27, 6-34, 6-38, 6-44 or 6-49 who provides their application to the college within 60 days of ceasing to be licensed in the applicable class of practising licensees.

(7) Subsection (1)(a), (k) and (o) to (s) do not apply to an applicant for multijurisdictional licensure under section 6-23, 6-29 or 6-36.

(8) Subsection (1) applies to an applicant for reinstatement or renewal of temporary (emergency) licensure under section 6-24(4), 6-30(4), 6-40(4), 6-46(4), 6-51(4) or 6-74 only to the extent specified by the licence committee under those provisions.

(9) This section does not apply

(a) to an applicant under section 6-58 to vary limits or conditions attached to their licence, except as provided in that section, or

(b) to an applicant for renewal of provisional licensure or employed student licensure under section 6-73 or 6-75, except as provided in those sections.

(10) If section 54(3) of the Act applies to an applicant, including an applicant for reinstatement, who does not hold current licensure in any class of practising licensees, provisional licensees or multijurisdictional licensees,

(a) the applicant must provide, or cause to be provided, to the college information satisfactory to the college that granting licensure, including reinstatement of licensure, will not pose an undue risk to public health or safety or otherwise be contrary to the public interest, and

(b) the licence committee may, if relevant for that purpose, require the applicant to provide proof of successful completion of a competence assessment, capacity evaluation, or other examination.

(11) For greater certainty, a requirement for an applicant to provide information under subsection (10) does not limit or restrict the discretion of the licence committee to make an adverse application decision based on an opinion referred to in section 54(4) of the Act.

(12) If, with respect to the information and items required under the bylaws to be included in, or with, an application for licensure, a provision in this Part requires that an applicant must provide an item, or cause an item to be provided, to the college, the registrar may determine whether an applicant must provide the item or cause the item to be provided.

Eligibility standards for Canadian labour mobility applicants

6-5 (1) Subject to section 3(4) of the *Labour Mobility Act*, section 54 of the Act and section 6-4(10), an applicant who is authorized in another Canadian jurisdiction to practise the profession for which they are seeking licensure may be granted a practising licence if the applicant

(a) holds registration or licensure in the other Canadian jurisdiction as the equivalent of a practising licensee in good standing,

(b) is not subject to any practice limitations, restrictions or conditions in the other Canadian jurisdiction that are relevant to the practice of the profession in British Columbia,

(c) meets all applicable continuing competence or quality assurance requirements established by the regulatory body governing the applicable profession in the other Canadian jurisdiction,

(d) provides information satisfactory to the college confirming that the applicant meets the requirements in paragraphs (a) to (c), and

(e) meets the requirements established in section 6-4(1)(a) and (c) to (v).

(2) Despite subsection (1)(e), section 6-4(1)(k) does not apply to an applicant under this section

(a) for reinstatement of practising licensure, or

(b) who was required to establish their English language proficiency as a condition of registration or licensure in the other Canadian jurisdiction.

(3) Nothing in this section prevents the licence committee from imposing any term, limit or condition authorized under section 3(4) of the *Labour Mobility Act,* including, for greater certainty, a condition precedent to licensure that is authorized under Article 705.4 of the Canadian Free Trade Agreement and that

(a) is the same as, or substantially similar to, but no more onerous than

(i) the conditions that the college requires practising licensees in British Columbia to meet in order to maintain their licensure in the applicable class of practising licensees, or

(ii) the conditions imposed on applicants from British Columbia for reinstatement in the applicable class of practising licensees, and

(b) does not create disguised restriction on labour mobility.

Recognition of education programs

6-6 (1) The education program review committee may, in accordance with this section and any applicable education program review committee policies or procedures under section 6-8, grant or renew recognition for education programs, including re-entry, refresher or bridging programs, offered by specific educational institutions for the purpose of

(a) practising LPN licensure,

(b) practising RPN licensure,

(c) practising RN licensure,

(d) practising NP licensure, and

(e) practising midwife licensure.

(2) Subject to subsection (3) and any applicable education program review committee policies or procedures under section 6-8, an educational institution may apply to the college for recognition of a new education program, or for renewal of recognition of an established education program, by providing a completed application to the registrar in the form required by the college.

(3) An educational institution is only eligible to apply under this section for recognition or renewal of recognition of an education program for the purpose of practising LPN licensure if the program follows the Practical Nursing Program Provincial Curriculum required by the Ministry of Post-Secondary Education and Future Skills.

(4) An educational institution that applies for recognition of a new education program, or for renewal of recognition for an established education program, for the purpose of practising LPN licensure must provide a report to the registrar in the form required by the college, and any additional information required by the education program review committee or the registrar, to confirm that the education program

(a) will meet or continue to meet the education standards and indicators described in Schedule B, and

(b) will prepare or continue to prepare its graduates

(i) to meet the entry-level competencies and eligibility standards required by the college for practising LPN licensure, and

(ii) to comply with the ethics standards and practice standards applicable to practising LPN licensees.

(5) An educational institution that applies for recognition of a new education program, or for renewal of recognition for an established education program, for the purpose of practising RPN licensure must provide a report to the registrar in the form required by the college, and any additional information required by the education program review committee or the registrar, to confirm that the education program

(a) will meet or continue to meet the education standards and indicators described in Schedule B, and

(b) will prepare or continue to prepare its graduates

(i) to meet the entry-level competencies and eligibility standards required by the college for practising RPN licensure, and

(ii) to comply with the ethics standards and practice standards applicable to practising RPN licensees.

(6) An educational institution that applies for recognition of a new education program, or for renewal of recognition for an established education program, for the purpose of practising RN licensure must provide a report to the registrar in the form required

by the college, and any additional information required by the education program review committee or the registrar, to confirm that the education program

(a) will meet or continue to meet the education standards and indicators described in Schedule B, and

(b) will prepare or continue to prepare its graduates

(i) to meet the entry-level competencies and eligibility standards required by the college for practising RN licensure, and

(ii) to comply with the ethics standards and practice standards applicable to practising RN licensees.

(7) An educational institution that applies for recognition of a new education program, or for renewal of recognition for an established education program, for the purpose of practising NP licensure must provide a report to the registrar in the form required by the college, and any additional information required by the education program review committee or the registrar, to confirm that the education program

(a) will meet or continue to meet the education standards and indicators described in Schedule B, and

(b) will prepare or continue to prepare its graduates

(i) to meet the entry-level competencies and eligibility standards required by the college for practising NP licensure, and

(ii) to comply with the ethics standards and practice standards applicable to practising NP licensees.

(8) An educational institution that applies for recognition of a new education program, or for renewal of recognition for an established education program, for the purpose of practising midwife licensure must provide a report to the registrar in the form required by the college, and any additional information required by the education program review committee or the registrar, to confirm that the education program

(a) will meet or continue to meet the education standards and indicators described in Schedule B, and

(b) will prepare or continue to prepare its graduates

(i) to meet the entry-level competencies and eligibility standards required by the college for practising midwife licensure, and

(ii) to comply with the ethics standards and practice standards applicable to practising midwife licensees.

(9) In addition to the report and any other information provided by an educational institution under subsection (4), (5), (6), (7) or (8), the education program review committee or the registrar may require the educational institution to provide supplementary information or to undergo and cooperate with a site visit by one or more site visitors appointed by the registrar, to provide additional evidence to confirm that the educational institution’s education program

(a) will meet or continue to meet the applicable education standards and indicators, and

(b) will prepare or continue to prepare its graduates

(i) to meet the entry-level competencies and eligibility standards required by the college for the applicable class of licensees, and

(ii) to comply with the ethics standards and practice standards applicable to the applicable class of licensees.

(10) Subject to subsections (11) and (12), the education program review committee may grant or renew recognition of an education program under subsection (1) for a specified period of time, subject to any terms or conditions specified by the committee, if the committee is satisfied that the education program

(a) will meet or continue to meet the applicable education standards and indicators,

(b) will prepare or continue to prepare its graduates

(i) to meet the entry-level competencies and eligibility standards required by the college for the applicable class of licensees, and

(ii) to comply with the ethics standards and practice standards applicable to the applicable class of licensees, and

(c) will satisfy any other terms or conditions previously imposed by the committee.

(11) The education program review committee must determine the period of recognition granted to an education program under subsection (10) in the exercise of its discretion, having regard to any relevant factors described in applicable education program review committee policies or procedures under section 6-8, provided that

(a) the period of recognition granted to an established education program whose recognition is renewed must not exceed

(i) five years, for an LPN program or an RPN diploma program, or

(ii) seven years, for an RPN degree program or an RN, NP or midwifery program, and

(b) the period of recognition granted to a new education program must be shorter than the corresponding maximum period of recognition authorized for an established education program under paragraph (a).

(12) At the request of an educational institution applying for renewal of recognition of an established education program, the education program review committee or the registrar may extend the existing recognition of the education program on a provisional basis for a period of up to one year, subject to any terms or conditions that the committee considers necessary or appropriate to protect the public, if the committee is satisfied that, as a result of extenuating circumstances, it is in the public interest to grant that extension to give the educational institution additional time to provide information confirming that the education program will satisfy the requirements of subsection (10)(a), (b) and (c).

(13) If an educational institution does not provide sufficient information to satisfy the education program review committee that an education program will satisfy the requirements of subsection (10)(a), (b) and (c), the committee

(a) must assess the risk to the public of granting or renewing recognition to the education program, and

(b) having regard to that risk assessment, may

(i) grant or renew recognition for the education program for a specified period of time that is shorter than the corresponding maximum period of recognition under subsection (11), having regard to any relevant factors described in applicable education program review committee policies or procedures under section 6-8, subject to any terms or conditions that the committee considers necessary or appropriate to protect the public, or

(ii) deny recognition or renewal or recognition for the education program.

(14) An educational institution that offers an education program granted recognition under this section

(a) must comply with any terms or conditions imposed by the education program review committee, and

(b) must notify the college in writing and provide any relevant information requested by the registrar before implementing any substantial change to the education program involving one or more of the following:

(i) how the curriculum addresses the entry-level competencies and eligibility standards required by the college for the applicable class of licensees;

(ii) how the curriculum addresses applicable ethics standards and practice standards;

(iii) campus location, including relocation of a campus, establishing a new campus or satellite campus;

(iv) a change to the name of the educational institution;

(v) an increase in the number of students beyond 10 percent of what the committee has currently recognized;

(vi) discontinuation of a program or closing of a campus;

(vii) any other significant change that may impact the educational institution’s ability to prepare students to meet the entry-level competencies and eligibility standards required by the college for the applicable class of licensees.

(15) The education program review committee may remove any term or condition previously imposed on the education program if the committee is satisfied that the term or condition is no longer necessary or appropriate.

(16) If, having regard to any information provided by an educational institution under subsection (14), the education program review committee determines that a substantially changed education program may no longer satisfy the requirements of subsection (10)(a), (b) and (c), the committee may

(a) modify any existing terms or conditions imposed on the education program, or add additional terms or conditions that the committee considers necessary or appropriate, including a term or condition prohibiting the educational institution from making any substantial change to the education program, or

(b) reduce the existing period of recognition for the education program, with or without any changes to terms or conditions under paragraph (a).

(17) An existing education program ceases to be recognized if

(a) the period of recognition granted to the education program expires without being renewed or provisionally extended under this section, or

(b) the recognition of the education program is withdrawn under section 6-7.

(18) The registrar must ensure that a list of recognized education programs for each class of practising licensure is published on the college website, which must specify the expiration date of the current period of recognition granted to each program, and any terms or conditions of recognition that the education program review committee has directed to be published on the website.

Withdrawal of education program recognition

6-7 (1) At any time, if the education program review committee determines that the continued recognition of an educational institution's education program granted recognition under section 6-6 poses a risk to the public, because of

(a) the educational institution's failure to comply with terms or conditions previously imposed by the committee,

(b) any substantial change to the education program, or

(c) any other deficiencies identified by the committee,

the committee may issue a warning of withdrawal of education program recognition, notifying the educational institution that recognition of the education program may be withdrawn if terms and conditions specified in the warning are not met within the time specified in the warning.

(2) Before the education program review committee decides whether to withdraw recognition of an education program identified in a warning issued under subsection (1), the educational institution must be given a reasonable opportunity to provide information or submissions in response to any concerns identified in the warning for the committee's consideration, and to demonstrate satisfactory resolution of any deficiencies identified in the warning.

(3) After considering any information or submissions provided by the educational institution under subsection (2), the education program review committee may decide

(a) to continue the existing recognition of the education program without modification,

(b) to modify any existing terms or conditions imposed on the education program, or add additional terms or conditions that the committee considers necessary or appropriate,

(c) to reduce the existing period of recognition for the education program, with or without any changes to terms or conditions under paragraph (b), or

(d) to withdraw recognition of the education program on an effective date specified by the committee.

(4) If the education program review committee makes a decision under subsection (3)(a), (b) or (c), the committee must also decide whether to remove, continue or modify any pending warning issued under subsection (1).

Education program recognition policies

6-8 The education program review committee may establish additional policies and procedures respecting the recognition and withdrawal of recognition of education programs under sections 6-6 and 6-7, including but not limited to policies or procedures

(a) specifying additional prerequisites or eligibility requirements for an educational institution to apply for recognition of a new education program or type of education program,

(b) modifying or varying the education program review process for new or established education programs for specified educational institutions or a category of educational institutions,

(c) authorizing the registrar or a deputy registrar to modify or vary aspects of the education program review process for new or established programs for a particular educational institution in specified circumstances, or

(d) specifying factors relevant to determining the period of recognition granted to education programs.

Delegation of authority of education program review committee

6-9 Subject to any terms of reference set for the education program review committee under section 3-1(3) and any applicable education program review committee policies or procedures under section 6-8, the education program review committee may delegate the exercise of any of its powers or the performance of any its duties under sections 6-6 and 6-7 to

(a) the registrar or a deputy registrar, or

(b) another officer, employee or agent of the college designated by the registrar or a deputy registrar for that purpose under section 4-1(3).

Transition of education programs recognized under former Act

6-10 (1) Every practical nursing education program specified in Schedule B of the former bylaws immediately before the HPOA effective date is deemed to be recognized by the education program review committee for the purpose of practising LPN licensure under section 6-6, for a period of time and subject to any terms or conditions specified by the registrar under subsection (6).

(2) Every psychiatric nursing education program specified in Schedule C of the former bylaws immediately before the HPOA effective date is deemed to be recognized by the education program review committee for the purpose of practising RPN licensure under section 6-6, for a period of time and subject to any terms or conditions specified by the registrar under subsection (6).

(3) Every nursing education program specified in Schedule D of the former bylaws immediately before the HPOA effective date is deemed to be recognized by the education program review committee for the purpose of practising RN licensure under section 6-6, for a period of time and subject to any terms or conditions specified by the registrar under subsection (6).

(4) Every nurse practitioner education program specified in Schedule E of the former bylaws immediately before the HPOA effective date is deemed to be recognized by the education program review committee for the purpose of practising NP licensure under section 6-6, for a period of time and subject to any terms or conditions specified by the registrar under subsection (6).

(5) Every midwifery education program in British Columbia specified in Schedule F of the former bylaws immediately before the HPOA effective date is deemed to be recognized by the education program review committee for the purpose of practising midwife licensure under section 6-6, for a period of time and subject to any terms or conditions specified by the registrar under subsection (6).

(6) For each education program deemed to be recognized by the education program review committee under subsection (1), (2), (3), (4) or (5), the registrar must specify

(a) the education program's period of recognition, corresponding to the program recognition length approved by the board before the HPOA effective date in accordance with the *Education Program Review Policies* previously established by the board under the former Act, and

(b) any terms or conditions imposed on the education program, corresponding to any terms or conditions applicable to the education program immediately before the HPOA effective date under the *Education Program Review Policies* previously established by the board under the former Act.

Equivalency of other recognized Canadian education programs

6-11 An education program in another Canadian jurisdiction outside British Columbia that is recognized for the purpose of registration or licensure as the equivalent of a practising LPN licensee, a practising RPN licensee, a practising RN licensee, a practising NP licensee or a practising midwife licensee by the regulatory body governing the applicable profession in that other Canadian jurisdiction is deemed to be equivalent to an education program recognized by the education program review committee under section 6-6 for the purpose of licensure in the corresponding class of licensees.

Equivalency evaluators

6-12 The licence committee must appoint evaluators for the purpose of conducting equivalency determinations under section 6-13.

Equivalency determinations

6-13 (1) The registrar or the licence committee may require an applicant to undergo an equivalency determination under this section

(a) if the applicant is not entitled to licensure under section 6-5 and does not otherwise meet applicable eligibility standards because the applicant

(i) completed an education program outside Canada that is not recognized under section 6-6,

(ii) is applying to the college for initial licensure as a practising LPN licensee, a practising RPN licensee or a practising RN licensee more than five years after their completion of an education program recognized for that purpose under section 6-6 or deemed to be equivalent under section 6-11, or

(iii) is applying to the college for initial licensure as a practising NP licensee or a practising midwife licensee more than three years after their completion of an education program recognized for that purpose under section 6-6 or deemed to be equivalent under section 6-11, or

(b) if the applicant is applying to the college for reinstatement of practising licensure, in accordance with section 6-21(6), 6-27(6), 6-34(6), 6-38(6), 6-44(6) or 6-49(6).

(2) For greater certainty, an applicant who has not satisfied the requirement in section 6-4(1)(o) is not entitled to an equivalency determination under this section.

(3) An applicant who is required to undergo an equivalency determination must provide any information and records requested or ordered by the registrar to enable an evaluator to determine if the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6, having regard to the entry-level competencies and eligibility standards required by the college for the applicable class of licensees.

(4) When undertaking an equivalency determination, an evaluator

(a) must consider the applicant's credentials collectively and cumulatively, including

(i) any extrajurisdictional credentials held by the applicant,

(ii) the applicant's past or current licensure or registration to practise the profession in any jurisdiction, including any limitations or conditions imposed on the applicant's authorization to practise in any jurisdiction, and

(iii) any relevant evidence provided or caused to be provided by the applicant of professional experience acquired inside or outside Canada, including evidence of the nature, scope and currency of that professional experience and any gaps in practice, and

(b) may require the applicant to do any of the following:

(i) to undergo an assessment of their knowledge, skills, ability and judgment by Inspire Global Assessments or another similar body or organization recognized by the licence committee for the purpose of this section;

(ii) to participate in an interview to assess the extent and currency of the applicant's credentials, experience, knowledge, clinical skills, abilities and judgment;

(iii) to complete other testing to assess the applicant's knowledge and clinical skills;

(iv) to provide, or cause to be provided, any other information or records relevant to evaluating the substantial equivalency of the applicant's knowledge, skills, ability and judgment under subsection (3).

(5) For greater certainty, for the purposes of subsection (4)(a)(i), an evaluator may consider any relevant information relating to an education program completed by an applicant outside Canada, including

(a) whether the education program is recognized for the purpose of registration or licensure by a regulatory body governing the applicable profession in another Canadian jurisdiction,

(b) whether the expressed purpose of the education program is to educate and train students in the applicable profession,

(c) whether the education program provides publicly available criteria for admission and outcome data describing key information about program graduates,

(d) whether the education program includes clinical experience with supervision,

(e) whether there is sufficient evidence to satisfy the evaluator that

(i) the education program provides broad training in the practise of the profession, including the entry-level competencies required by the college,

(ii) the education program meets the applicable education standards and indicators of the college, and

(iii) graduates of the education program are adequately prepared to safely, ethically and competently practise the profession in a Canadian health care setting.

(6) An evaluator who conducts an equivalency determination of an applicant's knowledge, skills, ability and judgment must notify the applicant of the outcome of the equivalency determination, including

(a) the evaluator's reasons, if the evaluator concludes that the applicant has failed to establish that their knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6, and

(b) any transitional education or experience identified by the evaluator the successful completion of which, in the evaluator's opinion, will be sufficient

to address any apparent deficiencies or gaps in the applicant's knowledge, skills, ability and judgment.

(7) If an evaluator concludes that an applicant has failed to establish that their knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6, the applicant must elect either

(a) to accept the outcome of the equivalency determination completed by the evaluator under this section, including any transitional education or experience identified by the evaluator, or

(b) to request that the licence committee reconsider the applicant's equivalency determination.

(8) A request for reconsideration of an equivalency determination under subsection (7)(b) must be made by providing a completed application to the registrar, in the specified form, accompanied by any applicable reconsideration fee specified in Schedule G.

(9) If applicant applies under subsection (8) for reconsideration of their equivalency determination, the licence committee

(a) must give the applicant an opportunity to be heard under section 53(1) of the Act by inviting them to provide written submissions under section 380(2)(a) of the Act, and

(b) may accept, reject or vary the outcome of the equivalency determination, including any transitional education or experience identified by the evaluator, based on the committee's review of

(i) the information and records considered by the evaluator under this section,

(ii) any reasons provided by the evaluator under subsection (6)(a), and

(iii) any written submissions provided by the applicant under paragraph (a).

Periodic review of measures imposed on extrajurisdictional applicants

6-14 (1) The licence committee must periodically review eligibility standards, policies and procedures, to identify any prohibitions, requirements, limits and conditions imposed on extrajurisdictional applicants that do not substantially lower the risk of harm to the public.

(2) The licence committee may retain experts and engage in consultation with stakeholders in conducting its review.

(3) In conducting its review, the licence committee must consider whether the general types of prohibitions, requirements, limits and conditions imposed on extrajurisdictional applicants

(a) are rationally connected to the objective of protecting the public from harm,

(b) are proportionate to the objective of protecting the public from harm,

(c) have beneficial effects in terms of minimizing risk to the public that outweigh the impact on extrajurisdictional applicants, and

(d) support and enable extrajurisdictional applicants to practise in accordance with the guiding principles of the Act, particularly with respect to Indigenous-specific racism and anti-racism, and with respect to non- and anti-discriminatory practice more generally.

Examinations

6-15 (1) All examinations required to be taken under this Part must be approved for that purpose by the licence committee.

(2) An applicant for licensure in a class who, to the satisfaction of the licence committee, meets all other applicable eligibility standards is eligible to take any applicable required examination.

(3) An applicant described in subsection (2) must also meet any conditions or requirements for eligibility to take the required examination that are imposed by a third-party administrator or provider of the required examination, if the college is not solely responsible for establishing the eligibility of applicants to take the required examination.

(4) If there is reason to believe that an applicant has engaged in improper conduct during a required examination, the registrar must make a report to the licence committee and may recommend that the licence committee take one or more of the following actions:

(a) pass the applicant;

(b) fail the applicant;

(c) require the applicant to re-take the required examination;

(d) disqualify the applicant, for a period of time, from participating in any required examination;

(e) take any other action respecting the applicant, or require the applicant to take any other action, that the licence committee considers appropriate in the circumstances.

(5) After considering a report made under subsection (4), the licence committee may take one or more of the actions described in that subsection.

(6) An applicant in respect of whom an action described in subsection (4)(b) to (e) is taken under subsection (5) must be given written reasons for the action.

(7) If a required examination is provided or administered by the college,

(a) the licence committee must notify each applicant who takes the examination, in writing and as soon as reasonably practicable, of their examination result,

(b) an applicant who fails the examination on their first attempt may take it a second time, and if they fail again on their second attempt, they may take it a third time, and

(c) an applicant who fails a required examination three or more times is not eligible to take it again, unless the licence committee is satisfied that there are special circumstances warranting another attempt.

(8) The licence committee may establish additional examination procedures consistent with the bylaws.

Professional liability protection or insurance

6-16 (1) All LPN licensees must obtain, and at all times maintain, professional liability protection or insurance coverage against liability for negligence in the provision of services that constitute the practice of practical nursing in an amount not less than $1,000,000 per claim or per occurrence in a form satisfactory to the college.

(2) All RPN licensees must obtain, and at all times maintain, professional liability protection or insurance coverage against liability for negligence in the provision of services that constitute the practice of psychiatric nursing in an amount of not less than $5,000,000 per claim or per occurrence with a minimum aggregate amount for each year of $5,000,000

(a) as a beneficiary of the Canadian Nurses Protective Society, or

(b) under a policy of professional liability protection or insurance coverage of a type approved by the board, if the Canadian Nurses Protective Society is unable to provide the protection or the licensee is ineligible for the Canadian Nurses Protective Society's professional liability protection.

(3) All RN licensees and LGN licensees must obtain, and at all times maintain, professional liability protection or insurance coverage against liability for negligence in the provision of services that constitute the practice of nursing in an amount of not less than $5,000,000 per claim or per occurrence with a minimum aggregate amount for each year of $5,000,000

(a) as a beneficiary of the Canadian Nurses Protective Society, or

(b) under a policy of professional liability protection or insurance coverage of a type approved by the board, if the Canadian Nurses Protective Society is unable to provide the protection or the licensee is ineligible for the Canadian Nurses Protective Society's professional liability protection.

(4) All NP licensees must obtain, and at all times maintain, professional liability protection or insurance coverage against liability for negligence in the provision of services that constitute the practice of nursing as a nurse practitioner in an amount of not less than $10,000,000 per claim or per occurrence with a minimum aggregate amount for each year of $10,000,000

(a) as a beneficiary of the Canadian Nurses Protective Society, or

(b) under a policy of professional liability protection or insurance coverage of a type approved by the board, if the Canadian Nurses Protective Society is

unable to provide the protection or the licensee is ineligible for the Canadian Nurses Protective Society's professional liability protection.

(5) A midwife licensee, other than a non-practising midwife licensee, must obtain, and at all times maintain, professional liability protection or insurance coverage against liability for negligence in the provision of services that constitute the practice of midwifery in an amount not less than $15,000,000 per claim or per occurrence in a form satisfactory to the college.

(6) An LPN licensee or midwife licensee must immediately notify the registrar if they are no longer covered by professional liability protection or insurance as required by this section.

(7) An RPN licensee, RN licensee, LGN licensee or NP licensee must immediately notify the registrar if they are no longer eligible for the Canadian Nurses Protective Society's professional liability protection or otherwise covered by professional liability protection or insurance as required by this section.

(8) A licensee who ceases to be covered by professional liability protection or insurance as required by this section must immediately cease practising their designated health profession.

Duty to report changes in personal and contact information

6-17 A licensee or applicant for licensure, including an applicant for reinstatement, must immediately notify the registrar of any change in the personal and contact information that they previously provided to the college including, without limitation, changes to their name, to any mailing address, telephone number or email address, or to their employer, as well as matters referred to in section 6-18.

Duty to report criminal charges and disciplinary proceedings

6-18 (1) A licensee or applicant for licensure, including an applicant for reinstatement, who is charged with an offence under a federal, provincial or territorial statute anywhere in Canada, or an equivalent offence in a foreign jurisdiction, must immediately provide a written notice to the registrar specifying particulars of the charge.

(2) Despite subsection (1), no notification is required under that subsection in respect of a ticket under the *Contraventions Act* (Canada), a violation ticket under the *Offence Act*, or the equivalent in a jurisdiction outside British Columbia.

(3) A licensee or applicant for licensure, including an applicant for reinstatement, who becomes the subject of an investigation, inquiry, review or other proceeding in British Columbia or any other Canadian or foreign jurisdiction that could result in their authority to practise a profession being revoked, suspended, limited, restricted or made subject to limits or conditions must immediately, on becoming aware of the proceeding, provide a written notice to the registrar specifying particulars of the proceeding.

Division 3 – Licensed Practical Nurse Licensee Group

Classes of LPN licensees

6-19 (1) The following classes of licensees are established:

(a) practising LPN licensees;

(b) provisional LPN licensees;

(c) multijurisdictional LPN licensees;

(d) temporary LPN (emergency) licensees.

(2) A person must not be licensed concurrently in more than one of the classes established in subsection (1).

Eligibility standards for practising LPN licensure

6-20 (1) In addition to the applicable general eligibility standards in section 6-4, the class-specific eligibility standards for practising LPN licensure are

(a) successful completion of an LPN education program that is recognized by the education program review committee for the purpose of practising LPN licensure under section 6-6 or deemed to be equivalent under section 6-11, within the five-year period immediately preceding the date of their application,

(b) successful completion of the required entry to practice examination approved by the licence committee under section 6-15 for the purpose of practising LPN licensure, and

(c) provision to the college of the items specified in subsection (2).

(2) An applicant for practising LPN licensure must provide, or cause to be provided, to the college,

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degree, diploma, certificate or other credential from an education program described in subsection (1)(a), and confirming that the applicant is the person named therein,

(b) information satisfactory to the college confirming that the applicant has successfully completed the examination described in subsection (1)(b), and

(c) information satisfactory to the college confirming that the applicant is competent to practise as a practising LPN licensee.

(3) Despite subsections (1)(a) and (2)(a), an applicant who has not completed an education program described in subsection (1)(a) is eligible for practising LPN licensure if

(a) an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program

that is recognized by the education program review committee for the purpose of practising LPN licensure under section 6-6, and

(b) the applicant meets all other applicable eligibility standards.

(4) Despite subsections (1) and (2), an applicant who is a provisional LPN licensee is eligible for practising LPN licensure if

(a) the applicant's knowledge, skills, ability and judgment are determined to be substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6 for the purpose of practising LPN licensure, following completion of an equivalency determination under section 6-22(2)(a),

(b) the applicant is not subject to any incomplete audit under section 11-7, personal practice review under section 11-10, or quality assurance assessment, and

(c) the applicant provides, or causes to be provided, to the college information confirming

(i) their successful completion of the examination described in subsection (1)(b),

(ii) their satisfaction any other requirements imposed under section 6-22(7), including successful completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under section 6-22(7)(b), and

(iii) their successful completion of any other applicable requirements under section 6-22(5) or (6).

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of practising LPN registrants who satisfied the requirements for annual renewal of their registration under the former bylaws, the person is deemed to be a licensee in the class of practising LPN licensees under these bylaws.

Reinstatement of practising LPN licensure

6-21 (1) In this section, **"former practising LPN licensee"** includes a person who was previously registered as the equivalent of a practising LPN licensee under the former Act.

(2) A former practising LPN licensee is eligible for reinstatement of practising LPN licensure

(a) if they provide a completed application for reinstatement to the registrar, and meet the requirements in subsections (3) to (6), or

(b) if they currently hold a provisional LPN licence and are eligible for practising LPN licensure under section 6-20(4).

(3) An applicant for reinstatement under this section who currently holds a licence in another class of licensees must be in good standing.

(4) In addition to meeting the applicable general eligibility standards in section 6-4, an applicant for reinstatement under this section must provide, or cause to be provided, information satisfactory to the college confirming

(a) the applicant's compliance with the LPN currency requirement or an alternative requirement under section 6-61, unless the applicant undergoes an equivalency determination and satisfies the requirement in subsection (5),

(b) the applicant's completion of, or satisfactory cooperation with, an audit under section 11-7, if the applicant, while holding licensure, was selected for an audit under that section,

(c) the applicant's completion of, or satisfactory cooperation with, a quality assurance assessment, if the applicant, while holding licensure was selected for a quality assurance assessment under section 99(1) of the Act or section 11-8,

(d) the applicant's satisfaction of the personal practice review requirement under section 11-10, if required by section 11-10(4), and

(e) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment that the licence committee considers necessary for the applicant to be reinstated as a practising LPN licensee.

(5) If an applicant for reinstatement is required under subsection (6) to undergo an equivalency determination, the applicant is only eligible for reinstatement under this section if an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising LPN licensure under section 6-6.

(6) The registrar or the licence committee

(a) may require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the registrar or the licence committee considers it necessary to establish that the applicant has maintained knowledge, skills, ability and judgment that are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising LPN licensure under section 6-6, and

(b) must require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the applicant does not satisfy the LPN currency requirement or an alternative requirement under section 6-61 but meets all other applicable eligibility standards for reinstatement under this section.

Eligibility standards for provisional LPN licensure

6-22 (1) The licence committee may issue a provisional LPN licence to an applicant for practising LPN licensure under section 6-20, before or after completion of an equivalency determination, for a purpose described in subsection (2), if the

applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degrees, diplomas, certificates or other credentials, and confirming that the applicant is the person named therein, and

(b) evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of practical nursing subject to any limits or conditions imposed under subsection (7).

(2) An applicant described in subsection (1) may be issued a provisional LPN licence to temporarily allow the applicant to practise pending one or more of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's successful completion of the examination required under section 6-20(1)(b);

(c) the applicant's completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(3) The licence committee may issue a provisional LPN licence to an applicant for reinstatement of practising LPN licensure under section 6-21, before or after completion of an equivalency determination, for a purpose described in subsection (4), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of practical nursing subject to any limits or conditions imposed under subsection (7).

(4) An applicant described in subsection (3) may be issued a provisional LPN licence to temporarily allow the applicant to practise pending one or both of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(5) The licence committee may issue a provisional LPN licence to a practising LPN licensee whose licence expires under section 6-66(3) as a result of their failure to provide information required by section 6-60(6)(h)(ii) or (iii), to temporarily allow the licensee to continue to practise practical nursing, subject to any limits or conditions imposed under subsection (7), pending their completion of the required audit or quality assurance assessment for which they were selected.

(6) The licence committee may issue a provisional LPN licence to a practising LPN licensee whose licence expires under section 6-66(1)(a) as a result of their failure to satisfy the LPN currency requirement or an alternative requirement under section 6-61, if the licensee has been approved for a supervised practice

experience, to temporarily allow the licensee to continue to practise practical nursing, subject to any limits or conditions imposed under subsection (7), pending completion of their supervised practice experience.

(7) The licence committee may impose limits, conditions or requirements on a provisional LPN licensee, including but not limited to one or more of the following:

(a) limits or conditions

(i) restricting the scope of services that may be provided by the provisional LPN licensee,

(ii) restricting the locations or practice settings where the provisional LPN licensee may practise, or

(iii) requiring the provisional LPN licensee to be supervised by, or to practise under the direction of, a practising licensee approved by the college;

(b) requirements for the provisional LPN licensee to complete, within the time required by the licence committee, any or all of the following to demonstrate their eligibility for practising LPN licensure:

(i) further examinations in addition to the examination required under section 6-20(1)(b);

(ii) specified transitional education or clinical experience;

(iii) other upgrading of knowledge, skills, ability and judgment specified by the committee.

(8) If a person was, immediately before the HPOA effective date, a registrant in the class of provisional LPN registrants who satisfied the requirements for annual renewal of their registration under the former bylaws,

(a) the person is deemed to be a licensee in the class of provisional LPN licensees under these bylaws, and

(b) all limits and conditions imposed on the person's practice immediately before the HPOA effective date under section 20(4.3)(c) of the former Act and all requirements imposed on the person immediately before the HPOA effective date under section 20(4.3)(b) of the former Act are deemed to be imposed under subsection (7).

(9) A provisional LPN licence issued, or deemed to be issued, under this section is valid until

(a) the following March 31, or

(b) such earlier date as may be specified by the licence committee.

Eligibility standards for multijurisdictional LPN licensure

6-23 (1) In addition to the applicable general eligibility standards in section 6-4, the class specific eligibility standards for multijurisdictional LPN licensure are established in subsections (2) to (4).

(2) Subject to subsection (4), an applicant must

(a) hold registration or licensure in another Canadian jurisdiction as the equivalent of a practising LPN licensee in good standing,

(b) not be subject to any practice limitations, restrictions or conditions in that other Canadian jurisdiction that are relevant to the practice of practical nursing in British Columbia,

(c) meet all applicable continuing competence or quality assurance requirements established by the regulatory body governing the profession corresponding to practical nursing in that other Canadian jurisdiction, and

(d) provide information satisfactory to the college confirming that the applicant meets the requirements in paragraphs (a) to (c).

(3) The other Canadian jurisdiction referred to in subsection (2)(a) to (c) must be specified by ordinary resolution of the board for the purpose of this section.

(4) If an applicant holds registration or licensure as described in subsection (2)(a) in more than one other Canadian jurisdiction, the applicant must select, in accordance with any applicable criteria specified in licence committee policy, only one of those jurisdictions to be the "other Canadian jurisdiction" for the purposes of subsection (2) and the application of these bylaws to licensure, including reinstatement of licensure, in the class of multijurisdictional LPN licensees.

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of multijurisdictional LPN registrants under the former bylaws, the person is deemed to be a licensee in the class of multijurisdictional LPN licensees under these bylaws.

Eligibility standards for temporary LPN (emergency) licensure

6-24 (1) A temporary LPN (emergency) licence may be issued to an applicant to provide short-term services in the event of an emergency under the *Public Health Act*, or a declaration of an emergency situation by the registrar under section 4-1(7), if the applicant

(a) authorizes their current and former employers to provide information regarding their current practical nursing practice, or is a member of the armed forces of Canada,

(b) signs a declaration confirming that they are applying for a temporary LPN (emergency) licence solely for the purpose of providing assistance during the emergency event, and

(c) meets the requirements in subsection (2), (3) or (4).

(2) An applicant who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary LPN (emergency) licence if the applicant

(a) holds registration or licensure in another Canadian jurisdiction as the equivalent of a practising LPN licensee in good standing,

(b) is not subject to any practice limitations, restrictions or conditions in that other jurisdiction that are relevant to the practice of practical nursing in British Columbia,

(c) satisfies either the LPN currency requirement or section 6-61(1)(a)(i), and

(d) provides information satisfactory to the college confirming that the applicant meets the requirements in paragraphs (a) to (c).

(3) A former practising LPN licensee who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary LPN (emergency) licence if the applicant provides, or causes to be provided, to the college information confirming their entitlement to reinstatement of practising LPN licensure under section 6-21 including all applicable items under section 6-4(1).

(4) An applicant who meets the requirements in subsection (1)(a) and (b) and who held a temporary LPN (emergency) licence at any time during the previous 180 days is eligible for reinstatement of that licence if they provide, or cause to be provided, to the college any applicable items under section 6-4(1) that may be specified by the licence committee.

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of temporary LPN (emergency) registrants under the former bylaws, the person is deemed to be a licensee in the class of temporary LPN (emergency) licensees under these bylaws.

(6) A temporary LPN (emergency) licence issued, or deemed to be issued, under this section is valid until

(a) the end of the emergency described in subsection (1), or

(b) such earlier date as may be specified by the licence committee, not more than one year after the date of issuance of the licence.

Division 4 – Registered Psychiatric Nurse Licensee Group

Classes of RPN licensees

6-25 (1) The following classes of licensees are established:

(a) practising RPN licensees;

(b) provisional RPN licensees;

(c) multijurisdictional RPN licensees;

(d) temporary RPN (emergency) licensees;

(e) employed student psychiatric nurse licensees.

(2) A person must not be licensed concurrently in more than one of the classes established in subsection (1).

Eligibility standards for practising RPN licensure

6-26 (1) In addition to the applicable general eligibility standards in section 6-4, the class-specific eligibility standards for practising RPN licensure are

(a) successful completion of an RPN education program that is recognized by the education program review committee for the purpose of practising RPN licensure under section 6-6 or deemed to be equivalent under section 6-11, within the five-year period immediately preceding the date of their application,

(b) successful completion of the required entry to practice examination approved by the licence committee under section 6-15 for the purpose of practising RPN licensure, and

(c) provision to the college of the items specified in subsection (2).

(2) An applicant for practising RPN licensure must provide, or cause to be provided, to the college,

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degree, diploma, certificate or other credential from an education program described in subsection (1)(a), and confirming that the applicant is the person named therein,

(b) information satisfactory to the college confirming that the applicant has successfully completed the examination described in subsection (1)(b), and

(c) information satisfactory to the college confirming that the applicant is competent to practise as a practising RPN licensee.

(3) Despite subsections (1)(a) and (2)(a), an applicant who has not completed an education program described in subsection (1)(a) is eligible for practising RPN licensure if

(a) an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising RPN licensure under section 6-6, and

(b) the applicant meets all other applicable eligibility standards.

(4) Despite subsections (1) and (2), an applicant who is a provisional RPN licensee is eligible for practising RPN licensure if

(a) the applicant's knowledge, skills, ability and judgment are determined to be substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6 for the purpose of practising RPN licensure, following completion of an equivalency determination under section 6-28(2)(a),

(b) the applicant is not subject to any incomplete audit under section 11-7, personal practice review under section 11-10, or quality assurance assessment, and

(c) the applicant provides, or causes to be provided, to the college information confirming

(i) their successful completion of the examination described in subsection (1)(b),

(ii) their satisfaction of any other requirements imposed under section 6-28(7), including successful completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under section 6-28(7)(b), and

(iii) their successful completion of any other applicable requirements under section 6-28(5) or (6).

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of practising RPN registrants who satisfied the requirements for annual renewal of their registration under the former bylaws, the person is deemed to be a licensee in the class of practising RPN licensees under these bylaws.

Reinstatement of practising RPN licensure

6-27 (1) In this section, **"former practising RPN licensee"** includes a person who was previously registered as the equivalent of a practising RPN licensee under the former Act.

(2) A former practising RPN licensee is eligible for reinstatement of practising RPN licensure

(a) if they provide a completed application for reinstatement to the registrar, and meet the requirements in subsections (3) to (6), or

(b) if they currently hold a provisional RPN licence and are eligible for practising RPN licensure under section 6-26(4).

(3) An applicant for reinstatement under this section who currently holds a licence in another class of licensees must be in good standing.

(4) In addition to meeting the applicable general eligibility standards in section 6-4, an applicant for reinstatement under this section must provide, or cause to be provided, information satisfactory to the college confirming

(a) the applicant's compliance with the RPN currency requirement or an alternative requirement under section 6-62, unless the applicant undergoes an equivalency determination and satisfies the requirement in subsection (5),

(b) the applicant completion of, or satisfactory cooperation with, an audit under section 11-7, if the applicant, while holding licensure, was selected for an audit under that section,

(c) the applicant's completion of, or satisfactory cooperation with, a quality assurance assessment, if the applicant, while holding licensure, was selected for a quality assurance assessment under section 99(1) of the Act or section 11-8,

(d) the applicant's satisfaction of the personal practice review requirement under section 11-10, if required by section 11-10(4), and

(e) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment that the licence committee considers necessary for the applicant to be reinstated as a practising RPN licensee.

(5) If an applicant for reinstatement is required under subsection (6) to undergo an equivalency determination, the applicant is only eligible for reinstatement under this section if an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising RPN licensure under section 6-6.

(6) The registrar or the licence committee

(a) may require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the registrar or the licence committee considers it necessary to establish that the applicant has maintained knowledge, skills, ability and judgment that are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising RPN licensure under section 6-6, and

(b) must require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the applicant does not satisfy the RPN currency requirement or an alternative requirement under section 6-62 but meets all other applicable eligibility standards for reinstatement under this section.

Eligibility standards for provisional RPN licensure

6-28 (1) The licence committee may issue a provisional RPN licence to an applicant for practising RPN licensure under section 6-26, before or after completion of an equivalency determination, for a purpose described in subsection (2), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degrees, diplomas, certificates or other credentials, and confirming that the applicant is the person named therein, and

(b) evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of psychiatric nursing subject to any limits or conditions imposed under subsection (7).

(2) An applicant described in subsection (1) may be issued a provisional RPN licence to temporarily allow the applicant to practise pending one or more of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's successful completion of the examination required under section 6-26(1)(b);

(c) the applicant's completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(3) The licence committee may issue a provisional RPN licence to an applicant for reinstatement of practising RPN licensure under section 6-27, before or after completion of an equivalency determination, for a purpose described in subsection (4), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of psychiatric nursing subject to any limits or conditions imposed under subsection (7).

(4) An applicant described in subsection (3) may be issued a provisional RPN licence to temporarily allow the applicant to practise pending one or both of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(5) The licence committee may issue a provisional RPN licence to a practising RPN licensee whose licence expires under section 6-66(3) as a result of their failure to provide information required by section 6-60(6)(h)(ii) or (iii), to temporarily allow the licensee to continue to practise psychiatric nursing, subject to any limits or conditions imposed under subsection (7), pending their completion of the required audit or quality assurance assessment for which they were selected.

(6) The licence committee may issue a provisional RPN licence to a practising RPN licensee whose licence expires under section 6-66(1)(a) as a result of their failure to satisfy the RPN currency requirement or an alternative requirement under section 6-62, if the licensee has been approved for a supervised practice experience, to temporarily allow the licensee to continue to practise psychiatric nursing, subject to any limits or conditions imposed under subsection (7), pending completion of their supervised practice experience.

(7) The licence committee may impose limits, conditions or requirements on a provisional RPN licensee, including but not limited to one or more of the following:

(a) limits or conditions

(i) restricting the scope of services that may be provided by the provisional RPN licensee,

(ii) restricting the locations or practice settings where the provisional RPN licensee may practise, or

(iii) requiring the provisional RPN licensee to be supervised by, or to practise under the direction of, a practising licensee approved by the college;

(b) requirements for the provisional RPN licensee to complete, within the time required by the licence committee, any or all of the following to demonstrate their eligibility for practising RPN licensure:

(i) further examinations in addition to the examination required under section 6-26(1)(b);

(ii) specified transitional education or clinical experience;

(iii) other upgrading of knowledge, skills, ability and judgment specified by the committee.

(8) If a person was, immediately before the HPOA effective date, a registrant in the class of provisional RPN registrants who satisfied the requirements for annual renewal of their registration under the former bylaws,

(a) the person is deemed to be a licensee in the class of provisional RPN licensees under these bylaws, and

(b) all limits and conditions imposed on the person's practice immediately before the HPOA effective date under section 20(4.3)(c) of the former Act and all requirements imposed on the person immediately before the HPOA effective date under section 20(4.3)(b) of the former Act are deemed to be imposed under subsection (7).

(9) A provisional RPN licence issued, or deemed to be issued, under this section is valid until

(a) the following March 31, or

(b) such earlier date as may be specified by the licence committee.

Eligibility standards for multijurisdictional RPN licensure

6-29 (1) In addition to the applicable general eligibility standards in section 6-4, the class specific eligibility standards for multijurisdictional RPN licensure are established in subsections (2) to (4).

(2) Subject to subsection (4), an applicant must

(a) hold registration or licensure in another Canadian jurisdiction as the equivalent of a practising RPN licensee in good standing,

(b) not be subject to any practice limitations, restrictions or conditions in that other Canadian jurisdiction that are relevant to the practice of psychiatric nursing in British Columbia,

(c) meet all applicable continuing competence or quality assurance requirements established by the regulatory body governing the profession corresponding to psychiatric nursing in that other Canadian jurisdiction, and

(d) provide information satisfactory to the college confirming that the applicant meets the requirements in paragraphs (a) to (c).

(3) The other Canadian jurisdiction referred to in subsection (2)(a) to (c) must be specified by ordinary resolution of the board for the purpose of this section.

(4) If an applicant holds registration or licensure as described in subsection (2)(a) in more than one other Canadian jurisdiction, the applicant must select, in accordance with any applicable criteria specified in licence committee policy, only one of those jurisdictions to be the "other Canadian jurisdiction" for the purposes of subsection (2) and the application of these bylaws to licensure, including reinstatement of licensure, in the class of multijurisdictional RPN licensees.

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of multijurisdictional RPN registrants under the former bylaws, the person is deemed to be a licensee in the class of multijurisdictional RPN licensees under these bylaws.

Eligibility standards for temporary RPN (emergency) licensure

6-30 (1) A temporary RPN (emergency) licence may be issued to an applicant to provide short-term services in the event of an emergency under the *Public Health Act*, or a declaration of an emergency situation by the registrar under section 4-1(7), if the applicant

(a) authorizes their current and former employers to provide information regarding their current psychiatric nursing practice, or is a member of the armed forces of Canada,

(b) signs a declaration confirming that they are applying for a temporary RPN (emergency) licence solely for the purpose of providing assistance during the emergency event, and

(c) meets the requirements in subsection (2), (3) or (4).

(2) An applicant who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary RPN (emergency) licence if the applicant

(a) holds registration or licensure in another Canadian jurisdiction as the equivalent of a practising RPN licensee in good standing,

(b) is not subject to any practice limitations, restrictions or conditions in that other jurisdiction that are relevant to the practice of psychiatric nursing in British Columbia

(c) satisfies either the RPN currency requirement or section 6-62(1)(a)(i)(A) or (C) or (b), and

(d) provides information satisfactory to the college confirming that the applicant meets the requirements in paragraphs (a) to (c).

(3) A former practising RPN licensee who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary RPN (emergency) licence if the applicant provides, or causes to be provided, to the college information confirming their entitlement to reinstatement of practising RPN licensure under section 6-27 including all applicable items under section 6-4(1).

(4) An applicant who meets the requirements in subsection (1)(a) and (b) and who held a temporary RPN (emergency) licence at any time during the previous 180 days is eligible for reinstatement of that licence if they provide, or cause to be

provided, to the college any applicable items under section 6-4(1) that may be specified by the licence committee.

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of temporary RPN (emergency) registrants under the former bylaws, the person is deemed to be a licensee in the class of temporary RPN (emergency) licensees under these bylaws.

(6) A temporary RPN (emergency) licence issued, or deemed to be issued, under this section is valid until

(a) the end of the emergency described in subsection (1), or

(b) such earlier date as may be specified by the licence committee, not more than one year after the date of issuance of the licence.

Eligibility standards for employed student psychiatric nurse licensure

6-31 (1) In addition to the applicable general eligibility standards in section 6-4, the class-specific eligibility standards for employed student psychiatric nurse licensure are

(a) current enrollment as a student in an RPN education program that is recognized by the education program review committee for the purposes of practising RPN licensure under section 6-6 or deemed to be equivalent under section 6-11, and

(b) an offer of employment for the applicant to work as a student psychiatric nurse in a health care setting in British Columbia during or between terms of the applicant's RPN education program described in paragraph (a).

(2) An applicant for employed student psychiatric nurse licensure must provide, or cause to be provided, to the college, information satisfactory to the college confirming the applicant's enrollment and offer of employment described in subsection (1), and confirming that the applicant is the person named therein.

(3) If a person was, immediately before the HPOA effective date, a registrant in the class of employed student psychiatric nurse registrants who satisfied the requirements for annual renewal of their registration under the former bylaws, the person is deemed to be a licensee in the class of employed student psychiatric nurse licensees under these bylaws.

(4) An employed student psychiatric nurse licensee must notify the college within seven days

(a) if they cease to be enrolled as a student in an education program described in section (1)(a), or

(b) if they cease to be employed as described in section (1)(b), or their offer of employment is declined or withdrawn.

(5) Subject to section 6-70(2), an employed student psychiatric nurse licence issued, or deemed to be issued, under this section is valid until

(a) the following March 31, or

(b) such earlier date that is six days after the earlier of

(i) the date the licensee ceases to be enrolled as a student in an education program described in section (1)(a), and

(ii) the date the licensee ceases to be employed as described in section (1)(b), or, if applicable, the date that the licensee's offer of employment is declined or withdrawn.

Division 5 – Registered Nurse Licensee Group

Classes of RN licensees and LGN licensees

6-32 (1) The following classes of licensees are established:

(a) practising RN licensees;

(b) provisional RN licensees;

(c) multijurisdictional RN licensees;

(d) practising LGN licensees;

(e) provisional LGN licensees;

(f) temporary RN (emergency) licensees;

(g) employed student nurse licensees.

(2) A person must not be licensed concurrently in more than one of the classes established in subsection (1).

Eligibility standards for practising RN licensure

6-33 (1) In addition to the applicable general eligibility standards in section 6-4, the class-specific eligibility standards for practising RN licensure are

(a) successful completion of an RN education program that is recognized by the education program review committee for the purpose of practising RN licensure under section 6-6 or deemed to be equivalent under section 6-11, within the five-year period immediately preceding the date of their application,

(b) successful completion of the required entry to practice examination approved by the licence committee under section 6-15 for the purpose of practising RN licensure, and

(c) provision to the college of the items specified in subsection (2).

(2) An applicant for practising RN licensure must provide, or cause to be provided, to the college,

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degree, diploma, certificate or other credential from an education program described in subsection (1)(a), and confirming that the applicant is the person named therein,

(b) information satisfactory to the college confirming that the applicant has successfully completed the examination described in subsection (1)(b), and

(c) information satisfactory to the college confirming that the applicant is competent to practise as a practising RN licensee.

(3) Despite subsections (1)(a) and (2)(a), an applicant who has not completed an education program described in subsection (1)(a) is eligible for practising RN licensure if

(a) an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising RN licensure under section 6-6, and

(b) the applicant meets all other applicable eligibility standards.

(4) Despite subsections (1) and (2), an applicant who is a provisional RN licensee is eligible for practising RN licensure if

(a) the applicant's knowledge, skills, ability and judgment are determined to be substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6 for the purpose of practising RN licensure, following completion of an equivalency determination under section 6-35(2)(a),

(b) the applicant is not subject to any incomplete audit under section 11-7, personal practice review under section 11-10, or quality assurance assessment, and

(c) the applicant provides, or causes to be provided, to the college information confirming

(i) their successful completion of the examination described in subsection (1)(b),

(ii) their satisfaction of any other requirements imposed under section 6-35(7), including successful completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under section 6-35(7)(b), and

(iii) their successful completion of any other applicable requirements under section 6-35(5) or (6).

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of practising RN registrants who satisfied the requirements for annual renewal of their registration under the former bylaws, the person is deemed to be a licensee in the class of practising RN licensees under these bylaws.

Reinstatement of practising RN licensure

6-34 (1) In this section, **"former practising RN licensee"** includes a person who was previously registered as the equivalent of a practising RN licensee under the former Act.

(2) A former practising RN licensee is eligible for reinstatement of practising RN licensure

(a) if they provide a completed application for reinstatement to the registrar, and meet the requirements in subsections (3) to (6), or

(b) if they currently hold a provisional RN licence and are eligible for practising RN licensure under section 6-33(4).

(3) An applicant for reinstatement under this section who currently holds a licence in another class of licensees must be in good standing.

(4) In addition to meeting the applicable general eligibility standards in section 6-4, an applicant for reinstatement under this section must provide, or cause to be provided, information satisfactory to the college confirming

(a) the applicant's compliance with the RN currency requirement or an alternative requirement under section 6-63, unless the applicant undergoes an equivalency determination and satisfies the requirement in subsection (5),

(b) the applicant's completion of, or satisfactory cooperation with, an audit under section 11-7, if the applicant, while holding licensure, was selected for an audit under that section,

(c) the applicant's completion of, or satisfactory cooperation with, a quality assurance assessment, if the applicant, while holding licensure was selected for a quality assurance assessment under section 99(1) of the Act or section 11-8,

(d) the applicant's satisfaction of the personal practice review requirement under section 11-10, if required by section 11-10(4), and

(e) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment that the licence committee considers necessary for the applicant to be reinstated as a practising RN licensee.

(5) If an applicant for reinstatement is required under subsection (6) to undergo an equivalency determination, the applicant is only eligible for reinstatement under this section if an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising RN licensure under section 6-6.

(6) The registrar or the licence committee

(a) may require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the registrar or the licence committee considers it necessary to establish that the applicant has maintained knowledge, skills, ability and judgment that are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising RN licensure under section 6-6, and

(b) must require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the applicant does not satisfy the RN currency requirement or an alternative requirement under section 6-63 but meets all other applicable eligibility standards for reinstatement under this section.

Eligibility standards for provisional RN licensure

6-35 (1) The licence committee may issue a provisional RN licence to an applicant for practising RN licensure under section 6-33, before or after completion of an equivalency determination, for a purpose described in subsection (2), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degrees, diplomas, certificates or other credentials, and confirming that the applicant is the person named therein, and

(b) evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of nursing subject to any limits or conditions imposed under subsection (7).

(2) An applicant described in subsection (1) may be issued a provisional RN licence to temporarily allow the applicant to practise pending one or more of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's successful completion of the examination required under section 6-33(1)(b);

(c) the applicant's completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(3) The licence committee may issue a provisional RN licence to an applicant for reinstatement of practising RN licensure under section 6-34, before or after completion of an equivalency determination, for a purpose described in subsection (4), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of nursing subject to any limits or conditions imposed under subsection (7).

(4) An applicant described in subsection (3) may be issued a provisional RN licence to temporarily allow the applicant to practise pending one or both of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(5) The licence committee may issue a provisional RN licence to a practising RN licensee whose licence expires under section 6-66(3) as a result of their failure to provide information required by section 6-60(6)(h)(ii) or (iii), to temporarily allow the licensee to continue to practise nursing, subject to any limits or conditions imposed under subsection (7), pending their completion of the required audit or quality assurance assessment for which they were selected.

(6) The licence committee may issue a provisional RN licence to a practising RN licensee whose licence expires under section 6-64(1)(a) as a result of their failure to satisfy the RN currency requirement or an alternative requirement under section 6-63, if the licensee has been approved for a supervised practice experience, to temporarily allow the licensee to continue to practise nursing, subject to any limits or conditions imposed under subsection (7), pending completion of their supervised practice experience.

(7) The licence committee may impose limits, conditions or requirements on a provisional RN licensee, including but not limited to one or more of the following:

(a) limits or conditions

(i) restricting the scope of services that may be provided by the provisional RN licensee,

(ii) restricting the locations or practice settings where the provisional RN licensee may practise, or

(iii) requiring the provisional RN licensee to be supervised by, or to practise under the direction of, a practising licensee approved by the college;

(b) requirements for the provisional RN licensee to complete, within the time required by the licence committee, any or all of the following to demonstrate their eligibility for practising RN licensure:

(i) further examinations in addition to the examination required under section 6-33(1)(b);

(ii) specified transitional education or clinical experience;

(iii) other upgrading of knowledge, skills, ability and judgment specified by the committee.

(8) If a person was, immediately before the HPOA effective date, a registrant in the class of provisional RN registrants who satisfied the requirements for annual renewal of their registration under the former bylaws,

(a) the person is deemed to be a licensee in the class of provisional RN licensees under these bylaws, and

(b) all limits and conditions imposed on the person's practice immediately before the HPOA effective date under section 20(4.3)(c) of the former Act and all requirements imposed on the person immediately before the HPOA effective date under section 20(4.3)(b) of the former Act are deemed to be imposed under subsection (7).

(9) A provisional RN licence issued, or deemed to be issued, under this section is valid until

(a) the following March 31, or

(b) such earlier date as may be specified by the licence committee.

Eligibility standards for multijurisdictional RN licensure

6-36 (1) In addition to the applicable general eligibility standards in section 6-4, the class specific eligibility standards for multijurisdictional RN licensure are established in subsections (2) to (4).

(2) Subject to subsection (4), an applicant must

(a) hold registration or licensure in another Canadian jurisdiction as the equivalent of a practising RN licensee in good standing,

(b) not be subject to any practice limitations, restrictions or conditions in that other Canadian jurisdiction that are relevant to the practice of nursing in British Columbia,

(c) meet all applicable continuing competence or quality assurance requirements established by the regulatory body governing the profession corresponding to nursing in that other Canadian jurisdiction, and

(d) provide information satisfactory to the college confirming that the applicant meets the requirements in paragraphs (a) to (c).

(3) The other Canadian jurisdiction referred to in subsection (2)(a) to (c) must be specified by ordinary resolution of the board for the purpose of this section.

(4) If an applicant holds registration or licensure as described in subsection (2)(a) in more than one other Canadian jurisdiction, the applicant must select, in accordance with any applicable criteria specified in licence committee policy, only one of those jurisdictions to be the "other Canadian jurisdiction" for the purposes of subsection (2) and the application of these bylaws to licensure, including reinstatement of licensure, in the class of multijurisdictional RN licensees.

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of multijurisdictional RN registrants under the former bylaws, the person is deemed to be a licensee in the class of multijurisdictional RN licensees under these bylaws.

Practising LGN licensure

6-37 If a person was, immediately before the HPOA effective date, a registrant in the class of practising LGN registrants who satisfied the requirements for annual renewal of their registration under the former bylaws, the person is deemed to be a licensee in the class of practising LGN licensees under these bylaws.

Reinstatement of practising LGN licensure

6-38 (1) In this section, **"former practising LGN licensee"** includes a person who was previously registered as the equivalent of a practising LGN licensee under the former Act.

(2) A former practising LGN licensee is eligible for reinstatement of practising LGN licensure

(a) if they provide a completed application for reinstatement to the registrar, and meet the requirements in subsections (3) to (6), or

(b) if they currently hold a provisional LGN licence and meet the same eligibility requirements as a provisional RN licensee for reinstatement of practising RN licensure under section 6-33(4).

(3) An applicant for reinstatement under this section who currently holds a licence in another class of licensees must be in good standing.

(4) In addition to meeting the applicable general eligibility standards in section 6-4, an applicant for reinstatement under this section must provide, or cause to be provided, information satisfactory to the college confirming

(a) the applicant's compliance with the RN currency requirement or an alternative requirement under section 6-63, unless the applicant undergoes an equivalency determination and satisfies the requirement in subsection (5),

(b) the applicant's completion of, or satisfactory cooperation with, an audit under section 11-7, if the applicant, while holding licensure, was selected for an audit under that section,

(c) the applicant's completion of, or satisfactory cooperation with, a quality assurance assessment, if the applicant, while holding licensure was selected for a quality assurance assessment under section 99(1) of the Act or section 11-8,

(d) the applicant's satisfaction of the personal practice review requirement under section 11-10, if required by section 11-10(4), and

(e) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment that the licence committee considers necessary for the applicant to be reinstated as a practising LGN licensee.

(5) If an applicant for reinstatement is required under subsection (6) to undergo an equivalency determination, the applicant is only eligible for reinstatement under this section if an evaluator or the licence committee determines under section 6-

13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising RN licensure under section 6-6.

(6) The registrar or the licence committee

(a) may require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the registrar or the licence committee considers it necessary to establish that the applicant has maintained knowledge, skills, ability and judgment that are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising RN licensure under section 6-6, and

(b) must require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the applicant does not satisfy the RN currency requirement or an alternative requirement under section 6-63 but meets all other applicable eligibility standards for reinstatement under this section.

Eligibility standards for provisional LGN licensure

6-39 (1) The licence committee may issue a provisional LGN licence to an applicant for reinstatement of practising LGN licensure under section 6-38, before or after completion of an equivalency determination, for a purpose described in subsection (2), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of nursing subject to any limits or conditions imposed under subsection (5).

(2) An applicant described in subsection (1) may be issued a provisional LGN licence to temporarily allow the applicant to practise pending one or both of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (5)(b).

(3) The licence committee may issue a provisional LGN licence to a practising LGN licensee whose licence expires under section 6-66(3) as a result of their failure to provide information required by section 6-60(6)(h)(ii) or (iii), to temporarily allow the licensee to continue to practise nursing, subject to any limits or conditions imposed under subsection (5), pending their completion of the required audit or quality assurance assessment for which they were selected.

(4) The licence committee may issue a provisional LGN licence to a practising LGN licensee whose licence expires under section 6-66(1)(a) as a result of their failure to satisfy the RN currency requirement or an alternative requirement under section 6-63, if the licensee has been approved for a supervised practice experience, to

temporarily allow the licensee to continue to practise nursing, subject to any limits or conditions imposed under subsection (5), pending completion of their supervised practice experience.

(5) The licence committee may impose limits, conditions or requirements on a provisional LGN licensee, including but not limited to one or more of the following:

(a) limits or conditions

(i) restricting the scope of services that may be provided by the provisional LGN licensee,

(ii) restricting the locations or practice settings where the provisional LGN licensee may practise, or

(iii) requiring the provisional LGN licensee to be supervised by, or to practise under the direction of, a practising licensee approved by the college;

(b) requirements for the provisional LGN licensee to complete, within the time required by the licence committee, any or all of the following to demonstrate their eligibility for practising LGN licensure:

(i) the required entry to practice examination approved by the licence committee under section 6-15 for the purpose of practising RN licensure, or any other examinations;

(ii) specified transitional education or clinical experience;

(iii) other upgrading of knowledge, skills, ability and judgment specified by the committee.

(6) If a person was, immediately before the HPOA effective date, a registrant in the class of provisional LGN registrants who satisfied the requirements for annual renewal of their registration under the former bylaws,

(a) the person is deemed to be a licensee in the class of provisional LGN licensees under these bylaws, and

(b) all limits and conditions imposed on the person's practice immediately before the HPOA effective date under section 20(4.3)(c) of the former Act and all requirements imposed on the person immediately before the HPOA effective date under section 20(4.3)(b) of the former Act are deemed to be imposed under subsection (5).

(7) A provisional LGN licence issued, or deemed to be issued, under this section is valid until

(a) the following March 31, or

(b) such earlier date as may be specified by the licence committee.

Eligibility standards for temporary RN (emergency) licensure

6-40 (1) A temporary RN (emergency) licence may be issued to an applicant to provide short-term services in the event of an emergency under the *Public Health Act*, or

a declaration of an emergency situation by the registrar under section 4-1(7), if the applicant

(a) authorizes their current and former employers to provide information regarding their current nursing practice, or is a member of the armed forces of Canada or the United States,

(b) signs a declaration confirming that they are applying for a temporary RN (emergency) licence solely for the purpose of providing assistance during the emergency event, and

(c) meets the requirements in subsection (2), (3) or (4).

(2) An applicant who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary RN (emergency) licence if the applicant

(a) holds registration or licensure in another jurisdiction in Canada or the United States as the equivalent of a practising RN licensee in good standing,

(b) is not subject to any practice limitations, restrictions or conditions in that other jurisdiction that are relevant to the practice of nursing in British Columbia,

(c) satisfies either the RN currency requirement or section 6-63(1)(a)(i)(A) or (C) or (b), and

(d) provides information satisfactory to the college confirming that the applicant meets the requirements in paragraphs (a) to (c).

(3) A former practising RN licensee who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary RN (emergency) licence if the applicant provides, or causes to be provided, to the college information confirming their entitlement to reinstatement of practising RN licensure under section 6-34 including all applicable items under section 6-4(1).

(4) An applicant who meets the requirements in subsection (1)(a) and (b) and who held a temporary RN (emergency) licence at any time during the previous 180 days is eligible for reinstatement of that licence if they provide, or cause to be provided, to the college any applicable items under section 6-4(1) that may be specified by the licence committee.

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of temporary RN (emergency) registrants under the former bylaws, the person is deemed to be a licensee in the class of temporary RN (emergency) licensees under these bylaws.

(6) A temporary RN (emergency) licence issued, or deemed to be issued, under this section is valid until

(a) the end of the emergency described in subsection (1), or

(b) such earlier date as may be specified by the licence committee, not more than one year after the date of issuance of the licence.

Eligibility standards for employed student nurse licensure

6-41 (1) In addition to the applicable general eligibility standards in section 6-4, the class-specific eligibility standards for employed student nurse licensure are

(a) current enrollment as a student in an RN education program that is recognized by the education program review committee for the purposes of practising RN licensure under section 6-6 or deemed to be equivalent under section 6-11, and

(b) an offer of employment for the applicant to work as a student nurse in a health care setting in British Columbia during or between terms of the applicant's RN education program described in paragraph (a).

(2) An applicant for employed student nurse licensure must provide, or cause to be provided, to the college, information satisfactory to the college confirming the applicant's enrollment and offer of employment described in subsection (1), and confirming that the applicant is the person named therein.

(3) If a person was, immediately before the HPOA effective date, a registrant in the class of employed student nurse registrants who satisfied the requirements for annual renewal of their registration under the former bylaws, the person is deemed to be a licensee in the class of employed student nurse licensees under these bylaws.

(4) An employed student nurse licensee must notify the college within seven days

(a) if they cease to be enrolled as a student in an education program described in section (1)(a), or

(b) if they cease to be employed as described in section (1)(b), or their offer of employment is declined or withdrawn.

(5) Subject to section 6-70(2), an employed student nurse licence issued, or deemed to be issued, under this section is valid until

(a) the following March 31, or

(b) such earlier date that is six days after the earlier of

(i) the date the licensee ceases to be enrolled as a student in an education program described in section (1)(a), and

(ii) the date the licensee ceases to be employed as described in section (1)(b), or, if applicable, the date that the licensee's offer of employment is declined or withdrawn.

Division 6 – Nurse Practitioner Licensee Group

Classes of NP licensees

6-42 (1) The following classes of licensees are established:

(a) practising NP licensees;

(b) provisional NP licensees;

(c) temporary NP (emergency) licensees.

(2) A person must not be licensed concurrently in more than one of the classes established in subsection (1).

Eligibility standards for practising NP licensure

6-43 (1) In addition to the applicable general eligibility standards in section 6-4, the class-specific eligibility standards for practising NP licensure are

(a) current licensure or eligibility for licensure as a practising RN licensee,

(b) successful completion of an NP education program that is recognized by the education program review committee for the purpose of practising NP licensure under section 6-6 or deemed to be equivalent under section 6-11, within the three-year period immediately preceding the date of their application,

(c) successful completion of the required entry to practice examination approved by the licence committee under section 6-15 for the purpose of practising NP licensure, and

(d) provision to the college of the items specified in subsection (2).

(2) An applicant for practising NP licensure must provide, or cause to be provided, to the college,

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degree, diploma, certificate or other credential from an education program described in subsection (1)(b), and confirming that the applicant is the person named therein,

(b) information satisfactory to the college confirming that the applicant has successfully completed the examination described in subsection (1)(c), and

(c) information satisfactory to the college confirming that the applicant is competent to practise as a practising NP licensee.

(3) Despite subsections (1)(b) and (2)(a), an applicant who has not completed an education program described in subsection (1)(b) is eligible for practising NP licensure if

(a) an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising NP licensure under section 6-6, and

(b) the applicant meets all other applicable eligibility standards.

(4) Despite subsections (1) and (2), an applicant who is a provisional NP licensee is eligible for practising NP licensure if

(a) the applicant's knowledge, skills, ability and judgment are determined to be substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6 for the purpose of

practising NP licensure, following completion of an equivalency determination under section 6-45(2)(a),

(b) the applicant is not subject to any incomplete audit under section 11-7, personal practice review under section 11-10, or quality assurance assessment, and

(c) the applicant provides, or causes to be provided, to the college information confirming

(i) their successful completion of the examination described in subsection (1)(c),

(ii) their satisfaction of any other requirements imposed under section 6-45(7), including successful completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under section 6-45(7)(b), and

(iii) their successful completion of any other applicable requirements under section 6-45(5) or (6).

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of practising NP registrants who satisfied the requirements for annual renewal of their registration under the former bylaws, the person is deemed to be a licensee in the class of practising NP licensees under these bylaws.

Reinstatement of practising NP licensure

6-44 (1) In this section, **"former practising NP licensee"** includes a person who was previously registered as the equivalent of a practising NP licensee under the former Act.

(2) A former practising NP licensee is eligible for reinstatement of practising NP licensure

(a) if they provide a completed application for reinstatement to the registrar, and meet the requirements in subsections (3) to (6), or

(b) if they currently hold a provisional NP licence and are eligible for practising NP licensure under section 6-43(4).

(3) An applicant for reinstatement under this section who currently holds a licence in another class of licensees must be in good standing.

(4) In addition to meeting the applicable general eligibility standards in section 6-4, an applicant for reinstatement under this section must provide, or cause to be provided, information satisfactory to the college confirming

(a) the applicant's compliance with the RN currency requirement and NP currency requirement or an alternative requirement or requirements under section 6-63 or 6-64, unless the applicant undergoes an equivalency determination and satisfies the requirement in subsection (5),

(b) the applicant's completion of, or satisfactory cooperation with, an audit under section 11-7, if the applicant, while holding licensure, was selected for an audit under that section,

(c) the applicant's completion of, or satisfactory cooperation with, a quality assurance assessment, if the applicant, while holding licensure was selected for a quality assurance assessment under section 99(1) of the Act or section 11-8,

(d) the applicant's satisfaction of the personal practice review requirement under section 11-10, if required by section 11-10(4), and

(e) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment that the licence committee considers necessary for the applicant to be reinstated as a practising NP licensee.

(5) If an applicant for reinstatement is required under subsection (6) to undergo an equivalency determination, the applicant is only eligible for reinstatement under this section if an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising NP licensure under section 6-6.

(6) The registrar or the licence committee

(a) may require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the registrar or the licence committee considers it necessary to establish that the applicant has maintained knowledge, skills, ability and judgment that are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising NP licensure under section 6-6, and

(b) must require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the applicant does not satisfy the RN currency requirement and NP currency requirement or an alternative requirement under section 6-64 but meets all other applicable eligibility standards for reinstatement under this section.

Eligibility standards for provisional NP licensure

6-45 (1) The licence committee may issue a provisional NP licence to an applicant for practising NP licensure under section 6-43, before or after completion of an equivalency determination, for a purpose described in subsection (2), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degrees, diplomas, certificates or other credentials, and confirming that the applicant is the person named therein, and

(b) evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of nursing as a nurse practitioner subject to any limits or conditions imposed under subsection (7).

(2) An applicant described in subsection (1) may be issued a provisional NP licence to temporarily allow the applicant to practise pending one or more of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's successful completion of the examination required under section 6-43(1)(c);

(c) the applicant's completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(3) The licence committee may issue a provisional NP licence to an applicant for reinstatement of practising NP licensure under section 6-44, before or after completion of an equivalency determination, for a purpose described in subsection (4), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of nursing as a nurse practitioner subject to any limits or conditions imposed under subsection (7).

(4) An applicant described in subsection (3) may be issued a provisional NP licence to temporarily allow the applicant to practise pending one or both of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(5) The licence committee may issue a provisional NP licence to a practising NP licensee whose licence expires under section 6-66(3) as a result of their failure to provide information required by section 6-60(6)(h)(ii) or (iii), to temporarily allow the licensee to continue to practise nursing as a nurse practitioner, subject to any limits or conditions imposed under subsection (7), pending their completion of the required audit or quality assurance assessment for which they were selected.

(6) The licence committee may issue a provisional NP licence to a practising NP licensee whose licence expires under section 6-66(1)(a) as a result of their failure to satisfy the RN currency requirement and NP currency requirement or an alternative requirement under section 6-64, if the licensee has been approved for a supervised practice experience, to temporarily allow the licensee to continue to practise nursing as a nurse practitioner, subject to any limits or conditions imposed under subsection (7), pending completion of their supervised practice experience.

(7) The licence committee may impose limits, conditions or requirements on a provisional NP licensee, including but not limited to one or more of the following:

(a) limits or conditions

(i) restricting the scope of services that may be provided by the provisional NP licensee,

(ii) restricting the locations or practice settings where the provisional NP licensee may practise, or

(iii) requiring the provisional NP licensee to be supervised by, or to practise under the direction of, a practising licensee approved by the college;

(b) requirements for the provisional NP licensee to complete, within the time required by the licence committee, any or all of the following to demonstrate their eligibility for practising NP licensure:

(i) further examinations in addition to the examination required under section 6-43(1)(c);

(ii) specified transitional education or clinical experience;

(iii) other upgrading of knowledge, skills, ability and judgment specified by the committee.

(8) If a person was, immediately before the HPOA effective date, a registrant in the class of provisional NP registrants who satisfied the requirements for annual renewal of their registration under the former bylaws,

(a) the person is deemed to be a licensee in the class of provisional NP licensees under these bylaws, and

(b) all limits and conditions imposed on the person's practice immediately before the HPOA effective date under section 20(4.3)(c) of the former Act and all requirements imposed on the person immediately before the HPOA effective date under section 20(4.3)(b) of the former Act are deemed to be imposed under subsection (7).

(9) A provisional NP licence issued, or deemed to be issued, under this section is valid until

(a) the following March 31, or

(b) such earlier date as may be specified by the licence committee.

Eligibility standards for temporary NP (emergency) licensure

6-46 (1) A temporary NP (emergency) licence may be issued to an applicant to provide short-term services in the event of an emergency under the *Public Health Act*, or a declaration of an emergency situation by the registrar under section 4-1(7), if the applicant

(a) authorizes their current and former employers to provide information regarding their current practical nursing practice, or is a member of the armed forces of Canada,

(b) signs a declaration confirming that they are applying for a temporary NP (emergency) licence solely for the purpose of providing assistance during the emergency event, and

(c) meets the requirements in subsection (2), (3) or (4).

(2) An applicant who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary NP (emergency) licence if the applicant

(a) holds registration or licensure in another Canadian jurisdiction as the equivalent of a practising NP licensee in good standing,

(b) is not subject to any practice limitations, restrictions or conditions in that other jurisdiction that are relevant to the practice of nursing as a nurse practitioner in British Columbia,

(c) satisfies the RN currency requirement and NP currency requirement or applicable alternative requirements under sections 6-63(1)(a)(i)(A) or (C) or (b) and 6-64(1)(a)(i), and

(d) provides information satisfactory to the college confirming that the applicant meets the requirements in paragraphs (a) to (c).

(3) A former practising NP licensee who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary NP (emergency) licence if the applicant provides, or causes to be provided, to the college information confirming their entitlement to reinstatement of practising NP licensure under section 6-44 including all applicable items under section 6-4(1).

(4) An applicant who meets the requirements in subsection (1)(a) and (b) and who held a temporary NP (emergency) licence at any time during the previous 180 days is eligible for reinstatement of that licence if they provide, or cause to be provided, to the college any applicable items under section 6-4(1) that may be specified by the licence committee.

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of temporary NP (emergency) registrants under the former bylaws, the person is deemed to be a licensee in the class of temporary NP (emergency) licensees under these bylaws.

(6) A temporary NP (emergency) licence issued, or deemed to be issued, under this section is valid until

(a) the end of the emergency described in subsection (1), or

(b) such earlier date as may be specified by the licence committee, not more than one year after the date of issuance of the licence.

Division 7 – Midwife Licensee Group

Classes of midwife licensees

6-47 (1) The following classes of licensees are established:

(a) practising midwife licensees;

(b) provisional midwife licensees;

(c) temporary midwife (emergency) licensees;

(d) non-practising midwife licensees.

(2) A person must not be licensed concurrently in more than one of the classes established in subsection (1).

Eligibility standards for practising midwife licensure

6-48 (1) In addition to the applicable general eligibility standards in section 6-4, the class-specific eligibility standards for practising midwife licensure are

(a) successful completion of a midwifery education program that is recognized by the education program review committee for the purpose of practising midwife licensure under section 6-6 or deemed to be equivalent under section 6-11, within the three-year period immediately preceding the date of their application,

(b) successful completion of the required entry to practice examination approved by the licence committee under section 6-15 for the purpose of practising midwife licensure, and

(c) provision to the college of the items specified in subsection (2).

(2) An applicant for practising midwife licensure must provide, or cause to be provided, to the college,

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degree, diploma, certificate or other credential from an education program described in subsection (1)(a), and confirming that the applicant is the person named therein,

(b) information satisfactory to the college confirming that the applicant has successfully completed the examination described in subsection (1)(b),

(c) a declaration by the applicant, in a form acceptable to the college, in addition to the declarations required under section 6-4(1), specifying particulars of any of the following matters, if applicable, respecting the applicant's practice of midwifery or a health profession corresponding to midwifery in any jurisdiction:

(i) a dismissal for cause by an employer;

(ii) any verdict and recommendations of a coroner's investigation, inquiry or inquest;

(iii) a coroner's investigation, inquiry or inquest in progress;

(iv) a denial, suspension, restriction or modification of hospital admitting privileges or a permit to practise;

(v) a voluntary resignation of hospital privileges on the request or advice of a hospital or health authority administration;

(vi) a professional liability insurance claim;

(vii) any pending civil or criminal action, notice of claim or settlement or judgment in any civil or criminal proceeding to which the applicant is a party, and

(d) information satisfactory to the college confirming that the applicant is competent to practise as a practising midwife licensee.

(3) Despite subsections (1)(a) and (2)(a), an applicant who has not completed an education program described in subsection (1)(a) is eligible for practising midwife licensure if

(a) an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising midwife licensure under section 6-6, and

(b) the applicant meets all other applicable eligibility standards.

(4) Despite subsections (1) and (2), an applicant who is a provisional midwife licensee is eligible for practising midwife licensure if

(a) the applicant's knowledge, skills, ability and judgment are determined to be substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6 for the purpose of practising midwife licensure, following completion of an equivalency determination under section 6-50(2)(a),

(b) the applicant is not subject to any incomplete audit under section 11-7, personal practice review under section 11-10, or quality assurance assessment, and

(c) the applicant provides, or causes to be provided, to the college information confirming

(i) their successful completion of the examination described in subsection (1)(b),

(ii) their satisfaction of any other requirements imposed under section 6-50(7), including successful completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under section 6-50(7)(b), and

(iii) their successful completion of any other applicable requirements under section 6-50(5) or (6).

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of practising midwife registrants who satisfied the requirements for annual renewal of their registration under the former bylaws,

(a) the person is deemed to be a licensee in the class of practising midwife licensees under these bylaws, and

(b) if the person's practice of midwifery was subject to an alternative practice arrangement with the college immediately before the HPOA effective date, any applicable limits and conditions on the person's practice under that alternative practice arrangement are continued, and are deemed to have been imposed on the person's licence under section 52(2) of the Act, unless the registrar directs otherwise.

Reinstatement of practising midwife licensure

6-49 (1) In this section, **"former practising midwife licensee"** includes a non-practising midwife licensee or other person who was previously registered as the equivalent of a practising midwife licensee under the former Act.

(2) A former practising midwife licensee is eligible for reinstatement of practising midwife licensure

(a) if they provide a completed application for reinstatement to the registrar, and meet the requirements in subsections (3) to (6), or

(b) if they currently hold a provisional midwife licence and are eligible for practising midwife licensure under section 6-48(4).

(3) An applicant for reinstatement under this section who currently holds a licence in another class of licensees must be in good standing.

(4) In addition to meeting the applicable general eligibility standards in section 6-4, an applicant for reinstatement under this section must provide, or cause to be provided, information satisfactory to the college confirming

(a) the applicant's compliance with the midwife currency requirement or an alternative requirement under section 6-65, unless the applicant undergoes an equivalency determination and satisfies the requirement in subsection (5),

(b) the applicant's completion of, or satisfactory cooperation with, an audit under section 11-7, if the applicant, while holding licensure, was selected for an audit under that section,

(c) the applicant's completion of, or satisfactory cooperation with, a quality assurance assessment, if the applicant, while holding licensure was selected for a quality assurance assessment under section 99(1) of the Act or section 11-8,

(d) the applicant's satisfaction of the personal practice review requirement under section 11-10, if required by section 11-10(4), and

(e) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment that the licence committee considers necessary for the applicant to be reinstated as a practising midwife licensee.

(5) If an applicant for reinstatement is required under subsection (6) to undergo an equivalency determination, the applicant is only eligible for reinstatement under this section if an evaluator or the licence committee determines under section 6-13 that the applicant's knowledge, skills, ability and judgment are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising midwife licensure under section 6-6.

(6) The registrar or the licence committee

(a) may require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the registrar or the licence committee considers it necessary to establish that the applicant has maintained knowledge, skills, ability and judgment that are substantially equivalent to those expected of a new graduate of an education program that is recognized by the education program review committee for the purpose of practising midwife licensure under section 6-6, and

(b) must require an applicant for reinstatement under this section to undergo an equivalency determination under section 6-13 if the applicant does not satisfy the midwife currency requirement or an alternative requirement under section 6-65 but meets all other applicable eligibility standards for reinstatement under this section.

Eligibility standards for provisional midwife licensure

6-50 (1) The licence committee may issue a provisional midwife licence to an applicant for practising midwife licensure under section 6-48, before or after completion of an equivalency determination, for a purpose described in subsection (2), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college

(a) an original transcript, or other evidence satisfactory to the college, reflecting the applicant's degrees, diplomas, certificates or other credentials, and confirming that the applicant is the person named therein, and

(b) evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of midwifery subject to any limits or conditions imposed under subsection (7).

(2) An applicant described in subsection (1) may be issued a provisional midwife licence to temporarily allow the applicant to practise pending one or more of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's successful completion of the examination required under section 6-48(1)(b);

(c) the applicant's completion of any other examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(3) The licence committee may issue a provisional midwife licence to an applicant for reinstatement of practising midwife licensure under section 6-49, before or after completion of an equivalency determination, for a purpose described in subsection (4), if the applicant, in addition to meeting the applicable general eligibility standards in section 6-4, provides, or causes to be provided, to the college evidence satisfactory to the licence committee that the applicant is competent and fit to engage in the practice of midwifery subject to any limits or conditions imposed under subsection (7).

(4) An applicant described in subsection (3) may be issued a provisional midwife licence to temporarily allow the applicant to practise pending one or both of the following:

(a) the college's completion of an equivalency determination of the applicant's knowledge, skills, ability and judgment;

(b) the applicant's completion of any examinations, transitional education, clinical experience or other upgrading of knowledge, skills, ability and judgment required under subsection (7)(b).

(5) The licence committee may issue a provisional midwife licence to a practising midwife licensee whose licence expires under section 6-66(3) as a result of their failure to provide information required by section 6-60(6)(h)(ii) or (iii) or (7)(a), to temporarily allow the licensee to continue to practise midwifery, subject to any limits or conditions imposed under subsection (7), pending their completion of the required audit or quality assurance assessment for which they were selected.

(6) The licence committee may issue a provisional midwife licence to a practising midwife licensee whose licence expires under section 6-66(1)(a) as a result of their failure to satisfy the midwife currency requirement or an alternative requirement under section 6-65, if the licensee has been approved for a supervised practice experience, to temporarily allow the licensee to continue to practise midwifery, subject to any limits or conditions imposed under subsection (7), pending completion of their supervised practice experience.

(7) The licence committee may impose limits, conditions or requirements on a provisional midwife licensee, including but not limited to one or more of the following:

(a) limits or conditions

(i) restricting the scope of services that may be provided by the provisional midwife licensee,

(ii) restricting the locations or practice settings where the provisional midwife licensee may practise, or

(iii) requiring the provisional midwife licensee to be supervised by, or to practise under the direction of, a practising licensee approved by the college;

(b) requirements for the provisional midwife licensee to complete, within the time required by the licence committee, any or all of the following to demonstrate their eligibility for practising midwife licensure:

(i) further examinations in addition to the examination required under section 6-48(1)(b);

(ii) specified transitional education or clinical experience;

(iii) other upgrading of knowledge, skills, ability and judgment specified by the committee.

(8) If a person was, immediately before the HPOA effective date, a registrant in the class of provisional midwife registrants who satisfied the requirements for annual renewal of their registration under the former bylaws,

(a) the person is deemed to be a licensee in the class of provisional midwife licensees under these bylaws,

(b) all limits and conditions imposed on the person's practice immediately before the HPOA effective date under section 20(4.3)(c) of the former Act and all requirements imposed on the person immediately before the HPOA effective date under section 20(4.3)(b) of the former Act are deemed to be imposed under subsection (7), and

(c) if the person's practice of midwifery was subject to an alternative practice arrangement with the college immediately before the HPOA effective date, any applicable limits and conditions on the person's practice under that alternative practice arrangement are continued, and are deemed to have been imposed on the person's licence under section 52(2) of the Act, unless the registrar otherwise directs.

(9) A provisional midwife licence issued, or deemed to be issued, under this section is valid until

(a) the following March 31, or

(b) such earlier date as may be specified by the licence committee.

Eligibility standards for temporary midwife (emergency) licensure

6-51 (1) A temporary midwife (emergency) licence may be issued to an applicant to provide short-term services in the event of an emergency under the *Public Health Act*, or a declaration of an emergency situation by the registrar under section 4-1(7), if the applicant

(a) authorizes their current and former employers to provide information regarding their current midwifery practice, or is a member of the armed forces of Canada,

(b) signs a declaration confirming that they are applying for a temporary midwife (emergency) licence solely for the purpose of providing assistance during the emergency event, and

(c) meets the requirements in subsection (2), (3) or (4).

(2) An applicant who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary midwife (emergency) licence if the applicant

(a) holds registration or licensure in another Canadian jurisdiction as the equivalent of a practising midwife licensee in good standing,

(b) is not subject to any practice limitations, restrictions or conditions in that other jurisdiction that are relevant to the practice of midwifery in British Columbia

(c) satisfies either the midwife currency requirement or section 6-65(1)(a)(i), and

(d) provides information satisfactory to the college confirming that the applicant meets the requirements in paragraphs (a) to (c).

(3) A former practising midwife licensee who meets the requirements in subsection (1)(a) and (b) is eligible for a temporary midwife (emergency) licence if the applicant provides, or causes to be provided, to the college information confirming their entitlement to reinstatement of practising midwife licensure under section 6-49 including all applicable items under section 6-4(1).

(4) An applicant who meets the requirements in subsection (1)(a) and (b) and who held a temporary midwife (emergency) licence at any time during the previous 180 days is eligible for reinstatement of that licence if they provide, or cause to be provided, to the college any applicable items under section 6-4(1) that may be specified by the licence committee.

(5) If a person was, immediately before the HPOA effective date, a registrant in the class of temporary midwife (emergency) registrants under the former bylaws, the person is deemed to be a licensee in the class of temporary midwife (emergency) licensees under these bylaws.

(6) A temporary midwife (emergency) licence issued, or deemed to be issued, under this section is valid until

(a) the end of the emergency described in subsection (1), or

(b) such earlier date as may be specified by the licence committee, not more than one year after the date of issuance of the licence.

Non-practising midwife licensure

6-52 (1) If a person was, immediately before the HPOA effective date, a registrant in the class of non-practising midwife registrants under the former bylaws who satisfied all applicable conditions and requirements for renewal of their registration under the former Act, the person is deemed to be a licensee in the class of non-practising midwife licensees under these bylaws.

(2) If an individual's non-practising midwife licence expires under section 6-71 or is revoked or surrendered, it may not be reinstated.

Division 8 – Limitations on Class of Licence

LPN licensee group

6-53 (1) A practising LPN licensee or multijurisdictional LPN licensee

(a) may practise only the designated health profession of practical nursing, except as authorized through concurrent licensure in another class,

(b) may perform restricted activities only that a licensed practical nurse is authorized to perform under the regulations, subject to any applicable limits or conditions under the regulations, except as authorized through concurrent licensure in another class, and

(c) may only engage in aspects of practice that they are competent to perform.

(2) Subject to any limits or conditions imposed on their practice under section 6-22(7), a provisional LPN licensee may provide practical nursing services as if the licensee were a practising LPN licensee.

(3) A temporary LPN (emergency) licensee may provide practical nursing services solely for the purpose authorized by their declaration under section 6-24(1)(b) as if the licensee were a practising LPN licensee.

RPN licensee group

6-54 (1) A practising RPN licensee or multijurisdictional RPN licensee

(a) may practise only the designated health profession of psychiatric nursing, except as authorized through concurrent licensure in another class,

(b) may perform restricted activities only that a registered psychiatric nurse is authorized to perform under the regulations, subject to any applicable limits or conditions under the regulations, except as authorized through concurrent licensure in another class, and

(c) may only engage in aspects of practice that they are competent to perform.

(2) Subject to any limits or conditions imposed on their practice under section 6-28(7), a provisional RPN licensee may provide psychiatric nursing services as if the licensee were a practising RPN licensee.

(3) A temporary RPN (emergency) licensee may provide psychiatric nursing services solely for the purpose authorized by their declaration under section 6-30(1)(b) as if the licensee were a practising RPN licensee.

(4) An employed student psychiatric nurse licensee may provide psychiatric nursing services only, and may only perform restricted activities or any other aspects of psychiatric nursing practice requiring professional knowledge, skills, ability and judgment

(a) under the supervision of a practising RPN licensee, multijurisdictional RPN licensee, practising RN licensee, multijurisdictional RN licensee or practising NP licensee, in the course of the employed student psychiatric nurse licensee's employment as described in section 6-31(1)(b), or

(b) as authorized under section 32 of the Act and Part 10, while in the process of meeting the requirements and conditions for licensure as a practising RPN licensee.

RN licensee group

6-55 (1) A practising RN licensee, multijurisdictional RN licensee or practising LGN licensee

(a) may practice only the designated profession of nursing, except as authorized through concurrent licensure in another class,

(b) may perform restricted activities only that a registered nurse is authorized to perform under the regulations, subject to any applicable limits or

conditions under the regulations, except as authorized through concurrent licensure in another class, and

(c) may only engage in aspects of practice that they are competent to perform.

(2) Subject to any limits or conditions imposed on their practice under section 6-35(7), a provisional RN licensee may provide nursing services as if the licensee were a practising RN licensee.

(3) Subject to any limits or conditions imposed on their practice under section 6-39(5), a provisional LGN licensee may provide nursing services as if the licensee were a practising LGN licensee.

(4) A temporary RN (emergency) licensee may provide nursing services solely for the purpose authorized by their declaration under section 6-40(1)(b) as if the licensee were a practising RN licensee.

(5) An employed student nurse licensee may provide nursing services only, and may only perform restricted activities or any other aspects of nursing practice requiring professional knowledge, skills, ability and judgment

(a) under the supervision of a practising RPN licensee, multijurisdictional RPN licensee, practising RN licensee, multijurisdictional RN licensee or practising NP licensee, in the course of the employed student nurse licensee's employment as described in section 6-41(1)(b), or

(b) as authorized under section 32 of the Act and Part 10, while in the process of meeting the requirements and conditions for licensure as a practising RN licensee.

NP licensee group

6-56 (1) A practising NP licensee

(a) may practice only the designated profession of nursing, except as authorized through concurrent licensure in another class,

(b) may perform restricted activities only that a nurse practitioner is authorized to perform under the regulations, subject to any applicable limits or conditions under the regulations, except as authorized through concurrent licensure in another class, and

(c) may only engage in aspects of practice that they are competent to perform.

(2) Subject to any limits or conditions imposed on their practice under section 6-45(7), a provisional NP licensee may provide nursing services as if the licensee were a practising NP licensee.

(3) A temporary NP (emergency) licensee may provide nursing services solely for the purpose authorized by their declaration under section 6-46(1)(b) as if the licensee were a practising NP licensee.

Midwife licensee group

6-57 (1) A practising midwife licensee

(a) may practice only the designated profession of midwifery, except as authorized through concurrent licensure in another class,

(b) may perform restricted activities only that a midwife is authorized to perform under the regulations, subject to any applicable limits or conditions under the regulations, except as authorized through concurrent licensure in another class, and

(c) may only engage in aspects of practice that they are competent to perform.

(2) Subject to any limits or conditions imposed on their practice under section 6-50(7), a provisional midwife licensee may provide midwifery services as if the licensee were a practising midwife licensee.

(3) A temporary midwife (emergency) licensee may provide midwifery services solely for the purpose authorized by their declaration under section 6-51(1)(b) as if the licensee were a practising midwife licensee.

(4) A non-practising midwife licensee must not, in British Columbia, engage in the clinical practice of the designated health profession of midwifery, except as authorized through concurrent licensure in another class.

Division 9 – Variance of Licence

Application to vary limits or conditions on licence

6-58 (1) A licensee may apply to vary limits or conditions attached to their licence by providing to the college

(a) a completed application to the registrar in the specified form,

(b) payment of any outstanding amount owed or owing by the applicant to the college, and

(c) any applicable fees set out in Schedule G.

(2) An applicant under subsection (1) must provide, or cause to be provided, to the college any relevant information or records the college directs them to provide in support of their request.

Division 10 – Annual Maintenance Requirements

Notice of annual fees and declaration process

6-59 (1) The college must deliver notice to each practising licensee and non-practising midwife licensee by January 15 of each year, of

(a) the annual fees payable by the licensee under Schedule G,

(b) the process for providing the annual declaration and accompanying information required under section 6-60, and

(c) the consequences that may result from late payment or non-payment of annual fees or from failure to provide the annual declaration and accompanying information required under section 6-60.

(2) The college must deliver notice of the matters described in subsection (1)(a), (b) and (c) to each provisional licensee by January 15 of each year, unless the licensee's licence is scheduled to expire before March 31 under section 6-67(a)(iv).

(3) The college must deliver notice of the matters described in subsection (1)(a), (b) and (c) to each multijurisdictional licensee at least 30 days before the applicable deadline for the licensee's payment of annual fees and provision of their completed annual declaration under section 6-60(3).

(4) The college must deliver notice of the matters described in subsection (1)(a), (b) and (c) to each employed student licensee by January 15 of each year, unless the licensee has notified the college that they will cease to be

(a) enrolled as a student in an education program described in section 6-31(1)(a) or 6-41(1)(a), as the case may be, or

(b) employed as described in section 6-31(1)(b) or 6-41(1)(b), as the case may be,

on or before March 31.

Annual declaration

6-60 (1) Every practising licensee and non-practising midwife licensee must provide to the college, by March 31 of each year, a completed annual declaration in the specified form, attesting to

(a) the licensee's compliance with the Act, the regulations and the bylaws, and any limits, conditions or requirements attached to their licence or otherwise imposed on the licensee under the Act,

(b) the truthfulness and completeness of the information submitted by the licensee in, or with, their annual declaration, and

(c) the licensee's understanding of the consequences that may result from submitting false or incomplete information in, or with, an annual declaration.

(2) Every provisional licensee applying for renewal of their licensure under section 6-73 must provide to the college, as part of their application for renewal under section 6-73(1)(a), a completed annual declaration attesting to the matters described in subsection (1)(a), (b) and (c).

(3) Every multijurisdictional licensee must provide to the college a completed annual declaration in the specified form attesting to the matters described in subsection (1)(a), (b) and (c) by the applicable deadline specified by the registrar.

(4) For the purpose of subsection (3), the registrar may specify different deadlines for

(a) different classes of multijurisdictional licensees,

(b) different groups of multijurisdictional licensees who hold registration or licensure in other Canadian jurisdictions, or

(c) different groups of multijurisdictional licensees who hold registration or licensure with regulatory bodies in other Canadian jurisdictions.

(5) Every employed student licensee applying for renewal of their licensure under section 6-75 must provide to the college, as part of their application for renewal under section 6-75(1)(a), a completed annual declaration attesting to the matters described in subsection (1)(a), (b) and (c).

(6) A licensee's annual declaration under subsection (1), (2), (3) or (5) must be accompanied by all of the following:

(a) payment of the applicable annual fees set out in Schedule G;

(b) payment of any outstanding amount owed or owing by the licensee to the college;

(c) for a licensee other than a non-practising midwife licensee, information satisfactory to the college confirming the licensee's ongoing compliance with the applicable requirements for professional liability protection or liability insurance;

(d) an updated criminal record check authorization or, if permitted by the registrar, criminal record check verification authorization, in the form required under the *Criminal Records Review Act*, if the licensee's most recent criminal record check authorization or criminal record check verification authorization was provided to the college more than five years earlier;

(e) updated documentation in a form satisfactory to the college providing the results of a national police check or the equivalent for any jurisdiction in which the applicant resided during the five-year period immediately before the date of the annual declaration, if the licensee

(i) has not previously provided such documentation to the college for the applicable jurisdiction, or

(ii) most recently provided such documentation to the college for the applicable jurisdiction more than five years earlier,

unless it is not reasonably practicable to obtain such documentation for the applicable jurisdiction,

(f) information satisfactory to the college confirming that the licensee continues to be a Canadian citizen, a permanent resident of Canada, or otherwise lawfully permitted to work in Canada;

(g) information satisfactory to the college confirming the licensee's compliance with any applicable requirements for mandatory vaccinations against transmissible illnesses required by or under an enactment other than the bylaws,

(h) information satisfactory to the college confirming

(i) for a licensee other than a non-practising midwife licensee, the licensee's compliance with any applicable currency requirement or

requirements under sections 11-13 to 11-17, or an applicable alternative requirement or requirements under sections 6-61 to 6-65, as the case may be,

(ii) the licensee's completion of, or satisfactory cooperation with, an audit under section 11-7, if they were selected for an audit under that section,

(iii) the licensee's completion of, or satisfactory cooperation with, a quality assurance assessment, if they were selected for a quality assurance assessment under section 99(1) of the Act or section 11-8, and

(iv) for a practising licensee, the licensee's satisfaction of the personal practice review requirement under section 11-10;

(i) any information the licensee is required to provide under section 6-17 or 6-18 that they have not previously provided to the college;

(j) any additional information required by subsection (7).

(7) In addition to the items described in subsection (6)(a) to (i),

(a) the first annual declaration provided by a practising midwife licensee or provisional midwife licensee under (1) or (2) on or after the third anniversary of the date of their initial grant of licensure as a practising midwife licensee or provisional midwife licensee must be accompanied by information satisfactory to the college confirming the licensee's compliance with the midwife consolidation requirement,

(b) a multijurisdictional licensee's annual declaration under subsection (3) must be accompanied by information satisfactory to the college confirming that the licensee continues to meet the applicable class specific eligibility standards described in section 6-23, 6-29 or 6-36, and

(c) an employed student licensee's annual declaration under subsection (5) must be accompanied by information satisfactory to the college confirming that the licensee continues to be

(i) enrolled as a student in an education program described in section 6-31(1)(a) or 6-41(1)(a), as the case may be, and

(ii) employed as described in section 6-31(1)(b) or 6-41(1)(b), as the case may be.

Alternatives to LPN currency requirement

6-61 (1) For the purposes of sections 6-21(4)(a), 6-24(2)(c) or 6-60(6)(h)(i), an LPN licensee or applicant is not required to satisfy the LPN currency requirement if, within the five-year period immediately preceding the date of their annual declaration or application,

(a) they successfully completed

(i) an LPN education program that is recognized by the education program review committee for the purpose of practising LPN

licensure under section 6-6 or deemed to be equivalent under section 6-11, or

(ii) a practical nursing practice experience under the guidance and supervision of a preceptor, for which the preceptor and design of the practical nursing practice experience were approved in advance by the registrar in accordance with any criteria established by the registrar for that purpose, or

(b) following the completion of an equivalency determination,

(i) an evaluator or the licence committee determined that the knowledge, skills, ability and judgment of the licensee or applicant were substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6 for the purpose of practising LPN licensure, or

(ii) the licensee or applicant successfully completed any transitional education or experience identified by the evaluator or the licence committee to be sufficient to address any apparent deficiencies or gaps in their knowledge, skills, ability and judgment.

(2) Without limiting subsection (1), for the purposes of section 6-60(6)(h)(i), a provisional LPN licensee is not required to satisfy the LPN currency requirement if they are in the process of completing any requirements imposed under section 6-22(7)(b) to demonstrate their eligibility for practising LPN licensure, and they are in compliance with any applicable deadlines to complete those requirements.

Alternatives to RPN currency requirement

6-62 (1) For the purposes of sections 6-27(4)(a), 6-30(2)(c) or 6-60(6)(h)(i), an RPN licensee or applicant is not required to satisfy the RPN currency requirement if

(a) within the five-year period immediately preceding the date of their annual declaration or application,

(i) they successfully completed

(A) an RPN education program that is recognized by the education program review committee for the purpose of practising RPN licensure under section 6-6 or deemed to be equivalent under section 6-11,

(B) a psychiatric nursing practice experience under the guidance and supervision of a preceptor, for which the preceptor and design of the psychiatric nursing practice experience were approved in advance by the registrar in accordance with any criteria established by the registrar for that purpose, or

(C) a post-basic program leading to a baccalaureate, masters or doctoral degree in psychiatric nursing or mental health nursing that is determined by the licence committee to be satisfactory to exempt the licensee or applicant from the RPN currency requirement, or

(ii) following the completion of an equivalency determination,

(A) an evaluator or the licence committee determined that the knowledge, skills, ability and judgment of the licensee or applicant were substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6 for the purpose of practising RPN licensure, or

(B) the licensee or applicant successfully completed any transitional education or experience identified by the evaluator or the licence committee to be sufficient to address any apparent deficiencies or gaps in their knowledge, skills, ability and judgment, or

(b) they are currently enrolled in a post-basic program described in paragraph (a)(i)(C).

(2) Without limiting subsection (1), for the purposes of section 6-60(6)(h)(i), a provisional RPN licensee is not required to satisfy the RN currency requirement if they are in the process of completing any requirements imposed under section 6-28(7)(b) to demonstrate their eligibility for practising RPN licensure, and they are in compliance with any applicable deadlines to complete those requirements.

Alternatives to RN currency requirement

6-63 (1) For the purposes of sections 6-34(4)(a), 6-38(4)(a), 6-40(2)(c), 6-44(4)(a), 6-46(2)(c) or 6-60(6)(h)(i), an RN licensee, LGN licensee, NP licensee or applicant is not required to satisfy the RN currency requirement if

(a) within the five-year period immediately preceding the date of their annual declaration or application,

(i) they successfully completed

(A) an RN education program that is recognized by the education program review committee for the purpose of practising RN licensure under section 6-6 or deemed to be equivalent under section 6-11,

(B) a nursing practice experience under the guidance and supervision of a preceptor, for which the preceptor and design of the nursing practice experience were approved in advance by the registrar in accordance with any criteria established by the registrar for that purpose,

(C) a post-basic program leading to a baccalaureate, masters or doctoral degree in nursing or a field related to nursing that is determined by the licence committee to be satisfactory to exempt the licensee or applicant from the RN currency requirement, or

(ii) following the completion of an equivalency determination,

(A) an evaluator or the licence committee determined that the knowledge, skills, ability and judgment of the licensee or applicant were substantially equivalent to those expected of

a new graduate of an education program recognized under section 6-6 for the purpose of practising RN licensure, or

(B) the licensee or applicant successfully completed any transitional education or experience identified by the evaluator or the licence committee to be sufficient to address any apparent deficiencies or gaps in their knowledge, skills, ability and judgment, or

(b) they are currently enrolled in a post-basic program described in paragraph (a)(i)(C).

(2) Without limiting subsection (1), for the purposes of section 6-60(6)(h)(i), a provisional RN licensee or provisional LGN licensee is not required to satisfy the RN currency requirement if they are in the process of completing any requirements imposed under section 6-35(7)(b) or 6-39(5)(b) to demonstrate their eligibility for practising RN licensure or practising LGN licensure, and they are in compliance with any applicable deadlines to complete those requirements.

Alternatives to NP currency requirement

6-64 (1) For the purposes of sections 6-44(4)(a), 6-46(2)(c) or 6-60(6)(h)(i), an NP licensee or applicant is not required to satisfy the RN currency requirement and NP currency requirement if, within the three-year period immediately preceding the date of their annual declaration or application,

(a) they successfully completed

(i) an NP education program that is recognized by the education program review committee for the purpose of practising NP licensure under section 6-6 or deemed to be equivalent under section 6-11, or

(ii) a nurse practitioner practice experience under the guidance and supervision of a preceptor, for which the preceptor and design of the nurse practitioner practice experience were approved in advance by the registrar in accordance with any criteria established by the registrar for that purpose, or

(b) following the completion of an equivalency determination,

(i) an evaluator or the licence committee determined that the knowledge, skills, ability and judgment of the licensee or applicant were substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6 for the purpose of practising NP licensure, or

(ii) the licensee or applicant successfully completed any transitional education or experience identified by the evaluator or the licence committee to be sufficient to address any apparent deficiencies or gaps in their knowledge, skills, ability and judgment.

(2) Without limiting subsection (1), for the purposes of section 6-60(6)(h)(i), a provisional NP licensee is not required to satisfy the RN currency requirement and NP currency requirement if they are in the process of completing any requirements

imposed under section 6-45(7)(b) to demonstrate their eligibility for practising NP licensure, and they are in compliance with any applicable deadlines to complete those requirements.

Alternatives to midwife currency requirement

6-65 (1) For the purposes of sections 6-49(4)(a), 6-51(2)(c) or 6-60(6)(h)(i), a midwife licensee or applicant is not required to satisfy the midwife currency requirement if, within the three-year period immediately preceding the date of their annual declaration or application,

(a) they successfully completed

(i) a midwife education program that is recognized by the education program review committee for the purpose of practising midwife licensure under section 6-6 or deemed to be equivalent under section 6-11, or

(ii) a midwifery practice experience under the guidance and supervision of a preceptor, for which the preceptor and design of the midwifery practice experience were approved in advance by the registrar in accordance with any criteria established by the registrar for that purpose, or

(b) following the completion of an equivalency determination,

(i) an evaluator or the licence committee determined that the knowledge, skills, ability and judgment of the licensee or applicant were substantially equivalent to those expected of a new graduate of an education program recognized under section 6-6 for the purpose of practising midwife licensure, or

(ii) the licensee or applicant successfully completed any transitional education or experience identified by the evaluator or the licence committee to be sufficient to address any apparent deficiencies or gaps in their knowledge, skills, ability and judgment.

(2) Without limiting subsection (1), for the purposes of section 6-60(6)(h)(i), a provisional midwife licensee is not required to satisfy the midwife currency requirement if they are in the process of completing any requirements imposed under section 6-50(7)(b) to demonstrate their eligibility for practising midwife licensure, and they are in compliance with any applicable deadlines to complete those requirements.

Division 11 – Expiry of Licences

Expiry of practising licence

6-66 (1) Subject to subsection (4), if a practising licensee fails to provide to the college their annual declaration under section 6-60(1) accompanied by all of the items required under section 6-60(6) by the March 31 deadline to do so,

(a) the licensee's practising licence expires effective April 1, if the licensee has failed to pay the annual fees required by section 6-60(6)(a) or provide the information required by section 6-60(6)(c) or (h)(i), or

(b) the registrar must deliver a notice of non-compliance to the licensee under subsection (2), if paragraph (a) does not apply.

(2) A notice of non-compliance under this section must

(a) notify the licensee of their failure to provide a completed annual declaration accompanied by all of the items required under section 6-60(6) by March 31,

(b) specify which required items under section 6-60(6) remain outstanding,

(c) require the licensee to provide a completed annual declaration accompanied by the outstanding items specified under paragraph (b) by an extended deadline specified in the notice, which must be at least 30 days after the date of the notice, and

(d) notify the licensee of the consequences that may result from their failure to provide the items required under paragraph (c) by the specified extended deadline.

(3) If a practising licensee fails to provide to the college a completed annual declaration accompanied by all outstanding items required by a notice of non-compliance under subsection (2) by the extended deadline specified in the notice, their practising licence expires on the first day after that extended deadline.

(4) The licence committee may issue a provisional licence to a licensee whose practising licence expires under subsection (1)(a) or (3) if authorized to do so under section 6-22(5) or (6), 6-28(5) or (6), 6-35(5) or (6), 6-39(3) or (4), 6-45(5) or (6) or 6-50(5) or (6).

(5) Nothing in this section limits or restricts the authority of the registrar to take any other action authorized under sections 108 and 109 of the Act as a result of a practising licensee's failure to provide a completed annual declaration or any other item required under section 6-60.

Expiry of provisional licence

6-67 A provisional licence expires

(a) on the first day after

(i) any applicable deadline for the licensee to complete any requirement imposed under section 6-22(7)(b), 6-28(7)(b), 6-35(7)(b), 6-39(5)(b), 6-45(7)(b) or 6-50(7)(b), as the case may be, if the licensee fails to complete that requirement by the specified deadline and the committee does not extend the deadline,

(ii) the date the registrar determines that the licensee has failed to successfully complete a supervised practice experience described in section 6-22(6), 6-28(6), 6-35(6), 6-39(4), 6-45(6) or 6-50(6), as the case may be,

(iii) the date the registrar determines that the licensee has failed to satisfy a condition imposed on their provisional licence under section 6-22(7), 6-28(7), 6-35(7), 6-39(5), 6-45(7) or 6-50(7), as the case may be, or

(iv) any applicable date specified by the licence committee under section 6-22(9)(b), 6-28(9)(b), 6-35(9)(b), 6-39(7)(b), 6-45(9)(b), 6-50(9)(b) or 6-73(5)(b)(ii) as the case may be, or

(b) on April 1, unless the licence committee renews the provisional licence under section 6-73.

Expiry of multijurisdictional licence

6-68 (1) A multijurisdictional licence expires immediately if the multijurisdictional license ceases to hold registration or licensure in the applicable other Canadian jurisdiction under section 6-23(2)(a), 6-29(2)(a) or 6-36(2)(a).

(2) If a multijurisdictional licensee fails to provide to the college their annual declaration under section 6-60(3) accompanied by all of the items required under section 6-60(6) and (7) by the applicable deadline specified under section 6-60(3), the licensee's multijurisdictional licence expires on the first day after the applicable deadline specified under section 6-60(3).

Expiry of temporary (emergency) licence

6-69 A temporary (emergency) licence expires on the first day after

(a) the date specified by the licence committee under section 6-24(6)(b), 6-30(6)(b), 6-40(6)(b), 6-46(6)(b), 6-51(6)(b) or 6-74(2)(b), as the case may be, unless the licence committee renews the temporary (emergency) licence under section 6-74, or

(b) the end of the applicable emergency described in section 6-24(1), 6-29(1), 6-40(1), 6-47(1) and 6-53(1).

Expiry of employed student licence

6-70 (1) Subject to subsection (2), an employed student licence expires

(a) on the date that is seven days after the earlier of

(i) the date the licensee ceases to be enrolled as a student in an education program described in section 6-31(1)(a) or 6-41(1)(a), as the case may be, and

(ii) the date that the licensee ceases to be employed as described in section 6-31(1)(b) or 6-41(1)(b), as the case may be, or, if applicable, the date that the licensee's offer of employment is declined or withdrawn, or

(b) on April 1, unless the licence committee renews the employed student licence under section 6-75.

(2) An employed student licence expires immediately if the licensee's employment described in section 6-31(1)(b) or 6-41(1)(b) is terminated for cause.

Expiry of non-practising midwife licence

6-71 If a non-practising midwife licensee fails to provide to the college their annual declaration under section 6-60(1) accompanied by all of the items required under section 6-60(6) by the March 31 deadline to do so, the licensee's non-practising midwife licence expires effective April 1.

Division 12 – Renewal

Notice of annual renewal process

6-72 (1) Subject to subsection (2), the college must deliver notice to each provisional licensee and employed student licensee, by January 15 of each year, of the process for annual renewal of their licence and the consequences of failing to renew.

(2) The college is not required to deliver a notice under subsection (1) to

(a) a provisional licensee whose licence is scheduled to expire before March 31 under section 6-67(a)(iv), or

(b) an employed student licensee who has notified the college that they will cease to be

(i) enrolled as a student in an education program described in section 6-31(1)(a) or 6-41(1)(a), as the case may be, or

(ii) employed as described in section 6-31(1)(b) or 6-41(1)(b), as the case may be,

on or before March 31.

Eligibility standards for renewal of provisional licence

6-73 (1) Subject to subsection (2), the licence committee may renew the licence of a provisional licensee who provides to the college, by any applicable deadline specified by the registrar,

(a) a completed application for renewal in the specified form, including a completed annual declaration as required under section 6-60(2), and

(b) all applicable items required under section 6-60(6).

(2) A provisional licensee is not eligible for renewal of their licence if their licence expires under section 6-67(a).

(3) Despite subsection (1)(b), the licence committee may renew the provisional licence of an applicant under subsection (1) who fails to provide information satisfactory to the college confirming their compliance with applicable quality assurance requirements described in section 6-60(6)(h)(ii) and (iii) or (7)(a) to temporarily allow the applicant to continue to practise the applicable designated health profession, subject to any limits or conditions imposed under subsection (5)(a), pending their completion of those quality assurance requirements and any additional requirements imposed under subsection (5)(a).

(4) Despite subsections (1) and (3), if the provisional licence of an applicant under subsection (1) has previously been renewed one or more times under this section without satisfying the applicable eligibility requirements for practising licensure under section 6-20(4), 6-26(4), 6-33(4), 6-43(4) or 6-48(4), the applicant is not eligible for a further renewal of their provisional licence unless

(a) the applicant's only outstanding eligibility requirement for practising licensure is completion of the applicable entry to practice examination required under section 6-20(1)(b), 6-26(1)(b), 6-33(1)(b), 6-43(1)(c) or 6-48(1)(b), the applicable deadline for the applicant to complete that examination has not expired, and the applicant has not already attempted twice to pass that examination, or

(b) in the opinion of the licence committee, exceptional circumstances exist to justify the further renewal of the applicant's provisional licence despite their failure to satisfy other outstanding eligibility requirements for practising licensure.

(5) A provisional licence renewed under this section

(a) is subject to the same limits, conditions and requirements imposed under section 6-22(7), 6-28(7), 6-35(7), 6-39(5), 6-45(7) or 6-50(7), as the case may be, unless those limits, conditions and requirements are varied by the licence committee, and

(b) is valid until

(i) the following March 31, or

(ii) such earlier date as may be specified by the licence committee.

Eligibility standards for renewal of temporary (emergency) licence

6-74 (1) The licence committee may renew the licence of a temporary (emergency) licensee in good standing who provides to the college

(a) a completed application for renewal in the specified form,

(b) the applicable fees set out in Schedule G,

(c) information satisfactory to the college confirming that the licensee continues to meet the applicable class specific eligibility standards described in section 6-24, 6-30, 6-40, 6-46 and 6-51, and

(d) any applicable items under section 6-4(1) that may be specified by the licence committee.

(2) A temporary (emergency) licence renewed under this section is valid until

(a) the end of the emergency described in section 6-24(1), 6-30(1), 6-40(1), 6-46(1) and 6-51(1), or

(b) such earlier date as may be specified by the licence committee, not more than one year after the date of renewal of the licence.

Eligibility standards for renewal of employed student licence

6-75 (1) The licence committee may renew the licence of an employed student licensee who provides to the college, by any applicable deadline specified by the registrar,

(a) a completed application for renewal in the specified form, including a completed annual declaration as required under section 6-60(5), and

(b) all applicable items required under section 6-60(6) and (7)(c).

(2) Subject to section 6-70(2), an employed student licence renewed under this section is valid until

(a) the following March 31, or

(b) such earlier date that is six days after the earlier of

(i) the date the licensee ceases to be enrolled as a student in an education program described in section 6-31(1)(a) or 6-41(1)(a), as the case may be, and

(ii) the date that the licensee ceases to be employed as described in section 6-31(1)(b) or 6-41(1)(b), as the case may be.

Division 13 – Decisions by Registrar

Registrar authorized to act

6-76 (1) The registrar is authorized to act under section 43 of the Act.

(2) For greater certainty,

(a) if the licence committee has the power under the bylaws to issue, vary, renew or reinstate a licence, with or without conditions, the registrar may issue, vary, renew or reinstate the licence under section 43 of the Act, and may exercise any incidental powers of the registrar under the bylaws, subject to any applicable limitations on the registrar's authority under section 43(2), (4) and (5) of the Act, and

(b) this section does not limit or restrict the authority of the registrar to act under section 44 of the Act.

Authority of registrar to investigate before decision

6-77 The registrar may investigate matters relevant to a licence application before making a decision under section 43 or 44 of the Act.

Notice of administrative refusal

6-78 When the registrar makes an adverse application decision under section 44(1) of the Act, the written notice and reasons required by section 44(2) of the Act

(a) must be provided to the applicant within 60 days of the date of the decision, and

(b) must inform the applicant of their right to apply for a reconsideration under sections 45 and 381 of the Act and section 6-79.

Reconsideration hearing process

6-79 (1) An applicant may apply for reconsideration of an adverse application decision under section 44(1) of the Act, within 30 days of their receipt of written notice of the decision under section 44(2) of the Act, by providing a completed application in the specified form accompanied by any applicable reconsideration fee specified in Schedule G.

(2) Upon receipt of an application for reconsideration, the registrar must give the applicant an opportunity to be heard by inviting them to provide written submissions under section 380(2)(a) of the Act before making a decision on the application.

(3) The registrar must deliver a written reconsideration decision with reasons to the applicant as soon as reasonably practicable.

Division 14 – Decisions by Licence Committee

Authority of licence committee to investigate before decision

6-80 (1) The licence committee may investigate, or may direct the registrar to investigate, matters relevant to a licence application before making a decision with respect to the application.

(2) The applicant must demonstrate that they meet all applicable eligibility standards and requirements for licensure under the Act, the regulations and the bylaws.

Hearing process for adverse application decision by licence committee

6-81 (1) Subject to subsection (2), before the licence committee makes an adverse application decision under section 53 of the Act, the registrar, on behalf of the licence committee, must provide

(a) written notice to the applicant, and

(b) an opportunity to be heard by inviting the applicant to provide written submissions under section 380(2)(a) of the Act.

(2) Subsection (1) does not apply to an adverse application decision

(a) that the licence committee is authorized to make without notice or a hearing under section 53(2) or 54 of the Act, or

(b) that reflects the outcome of an equivalency determination under section 6-13 if

(i) the applicant has accepted the outcome of that equivalency determination under section 6-13(7)(a), or

(ii) the licence committee has already given the applicant an opportunity to be heard under section 6-13(9).

Notice of adverse application decision by licence committee

6-82 When the licence committee makes an adverse application decision under section 53 of the Act, the written notice and reasons required by section 53(4) of the Act must be provided to the applicant within 60 days of the date of the decision.

Division 15 – Limits or Conditions

Imposition of limits or conditions by registrar or licence committee

6-83 (1) Subject to the bylaws and the terms of any applicable disciplinary order, the registrar or licence committee may impose limits or conditions on a licence under section 43(3) or 52(2) of the Act for any reason, including lack of currency in practice, when issuing, varying, renewing or reinstating a licence, including but not limited to one or more of the following:

(a) a requirement to practise under the supervision or direction of a practising licensee approved by the college, subject to any further specified terms, limits or conditions governing the supervision or direction of the licensee's practice;

(b) a limitation restricting the aspects of professional health care services that the licensee may provide;

(c) a requirement to complete examinations, education, training or other upgrading of knowledge, skills, ability and judgment respecting

(i) the prevention and avoidance of any form of discrimination described in section 9 of the Act,

(ii) the promotion and awareness of cultural safety, humility and Indigenous-specific and other anti-racism, and

(iii) any other matters relevant to the safe, competent and ethical practice of the applicable designated health profession;

(d) a requirement for the applicant to limit or restrict their practice until they have successfully completed measures required under paragraph (c);

(e) a requirement for periodic or random practice audits on terms specified by the college and to take further remedial steps if the practice audit results are not satisfactory to the college.

(2) Subject to subsection (4), the registrar or licence committee must provide

(a) written notice to an applicant or licensee of a proposed limit or condition under subsection (1) other than as requested by the applicant or licensee, and

(b) an opportunity to be heard by inviting the applicant or licensee to provide written submissions under section 380(2)(a) of the Act before the registrar or licence committee decides whether to impose the proposed limit or condition.

(3) For greater certainty, subsection (2) does not prevent the registrar or licence committee from varying a proposed limit or condition set out in a written notice under subsection (2)(a)

(a) in response to the applicant or licensee's written submissions under subsection (2)(b), or

(b) if the written notice under subsection (2)(a) provided the applicant or licensee with adequate notice of the possibility of the registrar or licensee considering such a variation of the proposed limit or condition.

(4) Subsection (2) does not apply to a limit or condition that the registrar or licence committee is authorized to impose without notice or a hearing under section 44(1), 53(2) or 54 of the Act.

(5) Every licence is deemed to include a condition that the registrar or the licence committee may vary, suspend or revoke the licence if they determine, after giving the licensee an opportunity to be heard, that the licensee made a misrepresentation or omission in their application, or in information provided to the college in support of their application, that was material to the previous decision to issue, vary, renew or reinstate the licensee's licence, having regard to

(a) the nature of the information misrepresented or omitted, including the likely impact of the misrepresentation or omission on the previous decision to issue, vary, renew or reinstate the licensee's licence,

(b) whether or to what extent the licensee knew or should have known at the time of their application that they were misrepresenting or omitting a material fact,

(c) whether the misrepresentation or omission is evidence of that the licensee does not meet the good character and fitness to practise requirements in section 6-4(1)(a), or any other applicable eligibility standard, and

(d) any other circumstances the registrar or the licence committee considers relevant.

(6) Every practising licence and multijurisdictional licence is deemed to include a condition that the registrar or the licence committee may vary, suspend or revoke the licence if they determine, after giving the licensee an opportunity to be heard, that the licensee has made a misrepresentation or omission in the information submitted in or with an annual declaration provided to the college under section 6-60, having regard to

(a) the nature of the information misrepresented or omitted, including whether the licensee's licence would have expired by operation of section 6-66(1)(a) or 6-68(2) or whether the registrar would likely have delivered a notice of non-compliance to the licensee under section 6-66(1)(b) if not for the misrepresentation or omission,

(b) whether or to what extent the licensee knew or should have known at the time of submitting their annual declaration that they were misrepresenting or omitting a material fact, and

(c) any other circumstances the registrar or the licence committee considers relevant.

Division 16 – Revocation of Licence

Revocation of licence due to misrepresentation or omission, or breach of specified condition

6-84 (1) The registrar or the licence committee may vary, suspend or revoke a licensee's licence

(a) in accordance with section 6-83(5), if the registrar or the licence committee determines, after giving the licensee an opportunity to be heard, that the licensee made a misrepresentation or omission in their application, or in information provided to the college in support of their application, that was material to the previous decision to issue, vary, renew or reinstate the licensee's licence, having regard to the factors described in section 6-83(5)(a) to (d),

(b) in accordance with section 6-83(6), if the registrar or the licence committee determines, after giving the licensee an opportunity to be heard, that the licensee misrepresented or omitted information required to be submitted in or with their annual declaration under section 6-60, having regard to the factors described in section 6-83(6)(a) to (c), or

(c) if the licensee's licence includes a condition authorizing the registrar or the licence committee to vary, suspend or revoke the licence if the licensee breaches or fails to satisfy another specified condition of the licence, and the registrar or the licence committee determines, after giving the licensee an opportunity to be heard, that the licensee has breached or failed to satisfy that specified condition.

(2) Before making a decision under subsection (1), the registrar or the licence committee must provide

(a) written notice to the licensee, and

(b) an opportunity to be heard by inviting the licensee to provide written submissions under section 380(2)(a) of the Act.

(3) If the registrar decides to vary, suspend or revoke a licensee's licence under subsection (1), the licensee may apply to the licence committee for a review of that decision within 14 days of their receipt of written notice of the decision, by providing a completed application in the specified form accompanied by

(a) any applicable review fee specified in Schedule G, and

(b) any additional written submissions that the licensee would like the licence committee to consider.

(4) If a licensee applies under subsection (3) for review of a decision of the registrar under subsection (1), the licence committee must consider any written submissions provided by the licensee under subsections (2)(b) and (3)(b) before making a decision to confirm, vary or set aside the registrar's decision.

(5) A decision by the registrar under subsection (1) is not effective until

(a) the expiry of the deadline for the licensee to apply for a review of the decision under subsection (3), if the licensee does not provide a completed application for a review by that deadline, or

(b) the registrar delivers written notice to the licensee of a decision by the licence committee confirming the registrar's decision under subsection (4).

(6) A decision by the licence committee under subsection (1) or (4) is effective immediately upon the registrar delivering written notice of the decision to the licensee.

PART 7 - CERTIFICATION PROGRAMS

Definitions

7-1 In this Part, the following definitions apply:

"certified licensee" means an eligible licensee holding current certification under this Part in a certification program established under section 7-2;

"certified licensee currency requirement" means, in respect of a certification program established under section 7-2, any requirement described in section 11-18 for certified licensees to demonstrate currency in their performance of restricted activities authorized by that certification program;

"certified practice competencies" means, in respect of a certification program established under section 7-2, the knowledge, skills, abilities and judgment necessary

(a) to competently perform the applicable restricted activities that a certified licensee who is certified in that program is authorized to perform under section 23, 53 or 70 of the NMR in the applicable practice settings in which they may perform those activities, and

(b) to apply any applicable decision support tools for the purposes of paragraph (a);

"course provider" includes an educational institution or other agency offering or proposing to offer a certified practice course;

"eligible licensee" means

(a) in respect of the certification programs for RN licensees established under section 7-2(1), a practising RN licensee or multijurisdictional RN licensee,

(b) in respect of the certification program for RPN licensees established under section 7-2(2), a practising RPN licensee or multijurisdictional RPN licensee, and

(c) in respect of the certification programs for midwife licensees established under section 7-2(3), a practising midwife licensee.

Certification programs established

7-2 (1) The following certification programs for RN licensees are established for the purpose of section 7 of the RHPR:

(a) Remote Practice Certification Program;

(b) Reproductive Health (Sexually Transmitted Infections) Certification Program;

(c) Reproductive Health (Contraceptive Management) Certification Program;

(d) RN First Call Certification Program;

(e) Opioid Use Disorder Certification Program (RN).

(2) The Opioid Use Disorder Certification Program (RPN) for RPN licensees is established for the purpose of section 7 of the RHPR.

(3) The following certification programs for midwife licensees are established for the purpose of section 7 of the RHPR:

(a) Surgical First Assist for Cesarean Section Certification Program;

(b) Acupuncture Certification Program;

(c) Hormonal Contraceptive Therapy Certification Program;

(d) Intrauterine Contraception Insertion Certification Program;

(e) Sexually Transmitted Infections Management Certification Program;

(f) Induction and Augmentation of Labour Certification Program;

(g) Epidural Maintenance Certification Program;

(h) Vacuum Assisted Emergency Delivery Certification Program.

(4) For each certification program established under this section, the board must, by bylaw, make practice standards establishing

(a) the restricted activities that certified licensees certified in that certification program are authorized to perform under section 23, 53 or 70 of the NMR, in addition to those that practising RN licensees, practising RPN licensees or practising midwife licensees without certification are generally authorized to perform, and

(b) any applicable limits or conditions on the performance of the activities described in paragraph (a) by certified licensees certified in that certification program, including any limits or conditions respecting

(i) the purposes for which they may perform those activities, and

(ii) the practice settings in which they may perform those activities.

Applications for certification

7-3 (1) An eligible licensee may apply for certification in a certification program established under section 7-2 by providing a completed application to the registrar in the specified form, accompanied by any applicable fees set out in Schedule G.

(2) The registrar may certify an applicant under subsection (1) in the applicable certification program if the applicant is in good standing, and provides, or causes to be provided, information satisfactory to the college confirming that the applicant

(a) has, within the one-year period immediately preceding the date of their application, completed

(i) a certified practice course recognized by the education program review committee under section 7-4 for the purpose of the applicable certification program, or

(ii) a course in another Canadian jurisdiction outside British Columbia that is recognized by the registrar as equivalent to a course described in subparagraph (i), and

(b) has completed any additional education, training, experience or other qualifications required by the registrar under section 7-9(1) for applicants for certification in the applicable certification program.

(3) If an eligible licensee, immediately before the HPOA effective date, held a certified practice designation or midwife specialized practice certification under the former Act equivalent to certification in a certification program established under section 7-2, the eligible licensee is deemed to be certified in that certification program.

Recognition of certified practice courses

7-4 (1) The education program review committee may, in accordance with this section and any applicable education program review committee policies or procedures under section 7-6, grant or renew recognition for certified practice courses offered by specific course providers for the purpose of each certification program established under section 7-2.

(2) Subject to any applicable education program review committee policies or procedures under section 7-6, a course provider may apply to the college for recognition of a new certified practice course, or for renewal of recognition of an established certified practice course, by providing a completed application to the registrar in the form required by the college.

(3) A course provider that applies for recognition of a new certified practice course, or for renewal of recognition for an established certified practice course, must provide a report to the registrar in the form required by the college, and any additional information required by the education program review committee or the registrar, to confirm that the course will satisfy the requirements of subsection (5)(a), (b) and (c).

(4) In addition to the report and any other information provided by a course provider under subsection (3), the education program review committee or the registrar may require the course provider to provide supplementary information or to undergo and cooperate with a site visit by one or more site visitors appointed by the registrar, to provide additional evidence to confirm that the course provider's certified practice course will satisfy the requirements of subsection (5)(a), (b) and (c).

(5) Subject to subsections (6) and (7), the education program review committee may grant or renew recognition of a certified practice course under subsection (1) for a specified period of time, subject to any terms or conditions specified by the committee, if the committee is satisfied that the certified practice course

(a) will meet or continue to meet the education standards and indicators for certified practice courses described in Schedule C,

(b) will prepare or continue to prepare eligible licensees to achieve the applicable certified practice competencies, and

(c) will satisfy any other terms or conditions previously imposed by the committee.

(6) The education program review committee must determine the period of recognition granted to a certified practice course under subsection (5) in the exercise of its discretion, having regard to any relevant factors described in applicable education program review committee policies or procedures under section 7-6, provided that the period of recognition granted to a new certified practice course or to an established certified practice course whose recognition is renewed must not exceed three years.

(7) At the request of a course provider applying for renewal of recognition of an established certified practice course, the education program review committee or the registrar may extend the existing recognition of the certified practice course on a provisional basis for a period of up to one year, subject to any terms or conditions that the committee considers necessary or appropriate to protect the public, if the committee is satisfied that, as a result of extenuating circumstances, it is in the public interest to grant that extension to give the course provider additional time to provide information confirming that the certified practice course will satisfy the requirements of subsection (5)(a), (b) and (c).

(8) If a course provider does not provide sufficient information to satisfy the education program review committee that a certified practice course will satisfy the requirements of subsection (5)(a), (b) and (c), the committee

(a) must assess the risk to the public of granting or renewing recognition to the certified practice course, and

(b) having regard to that risk assessment, may

(i) grant or renew recognition for the certified practice course for a specified period of time that is shorter than the maximum period of recognition under subsection (6), having regard to any relevant factors described in applicable education program review committee policies or procedures under section 7-6, subject to any terms or conditions that the committee considers necessary or appropriate to protect the public, or

(ii) deny recognition or renewal of recognition for the certified practice course.

(9) A course provider that offers a certified practice course granted recognition under this section

(a) must comply with any terms or conditions imposed by the education program review committee, and

(b) must notify the college in writing and provide any relevant information requested by the registrar before implementing any substantial change to the certified practice course involving one or more of the following:

(i) how the curriculum addresses student achievement of the applicable certified practice competencies, including changes in the nature and extent of learning activities in the curriculum;

(ii) learning resources to support student achievement of the applicable certified practice competencies, including laboratory experiences or learning experiences with clients;

(iii) expectations about overall student performance, including evaluation of student practice and policies about safe student performance;

(iv) any other significant change that may impact the course provider's ability to prepare students to achieve the applicable certified practice competencies.

(10) The education program review committee may remove any term or condition previously imposed on the certified practice course if the committee is satisfied that the term or condition is no longer necessary or appropriate.

(11) If, having regard to any information provided by a course provider under subsection (9), the education program review committee determines that a substantially changed certified practice course may no longer satisfy the requirements of subsection (5)(a), (b) and (c), the committee may

(a) modify any existing terms or conditions imposed on the certified practice course, or add additional terms or conditions that the committee considers necessary or appropriate, including a term or condition prohibiting the course provider from making any substantial change to the certified practice course, or

(b) reduce the existing period of recognition for the certified practice course, with or without any changes to terms or conditions under paragraph (a).

(12) An existing certified practice course ceases to be recognized if

(a) the period of recognition granted to the certified practice course expires without being renewed or provisionally extended under this section, or

(b) the recognition of the certified practice course is withdrawn under section 7-5.

(13) The registrar must ensure that a list of certified practice courses recognized for each certification program established under section 7-2 is published on the college website, which must specify the expiration date of the current period of recognition granted to each course, and any terms or conditions of recognition that the education program review committee has directed to be published on the website.

Withdrawal of certified practice course recognition

7-5 (1) At any time, if the education program review committee determines that the continued recognition of a course provider's certified practice course granted recognition under section 7-4 poses a risk to the public, because of

(a) the course provider's failure to comply with terms or conditions previously imposed by the committee,

(b) any substantial change to the certified practice course, or

(c) any other deficiencies identified by the committee,

the committee may issue a warning of withdrawal of certified practice course recognition, notifying the course provider that recognition of the certified practice

course may be withdrawn if terms and conditions specified in the warning are not met within the time specified in the warning.

(2) Before the education program review committee decides whether to withdraw recognition of a certified practice course identified in a warning issued under subsection (1), the course provider must be given a reasonable opportunity to provide information or submissions in response to any concerns identified in the warning for the committee's consideration, and to demonstrate satisfactory resolution of any deficiencies identified in the warning.

(3) After considering any information or submissions provided by the course provider under subsection (2), the education program review committee may decide

(a) to continue the existing recognition of the certified practice course without modification,

(b) to modify any existing terms or conditions imposed on the certified practice course, or add additional terms or conditions that the committee considers necessary or appropriate,

(c) to reduce the existing period of recognition for the certified practice course, with or without any changes to terms or conditions under paragraph (b), or

(d) to withdraw recognition of the certified practice course on an effective date specified by the committee.

(4) If the education program review committee makes a decision under subsection (3)(a), (b) or (c), the committee must also decide whether to remove, continue or modify any pending warning issued under subsection (1).

Certified practice course recognition policies

7-6 The education program review committee may establish additional policies and procedures respecting the recognition and withdrawal of recognition of certified practice courses under sections 7-4 and 7-5, including but not limited to policies or procedures

(a) specifying additional prerequisites or eligibility requirements for a course provider to apply for recognition of a new certified practice course or type of certified practice course,

(b) modifying or varying the education program review process for new or established certified practice courses for specified course providers or a category of course providers,

(c) authorizing the registrar or a deputy registrar to modify or vary aspects of the education program review process for new or established certified practice courses for a particular course provider in specified circumstances, or

(d) specifying factors relevant to determining the period of recognition granted to certified practice courses.

Delegation of authority of education program review committee

7-7 Subject to any terms of reference set for the education program review committee under section 3-1(3) and any applicable education program review committee policies or

procedures under section 7-6, the education program review committee may delegate the exercise of any of its powers or the performance of any of its duties under sections 7-4 and 7-5 to

(a) the registrar or a deputy registrar, or

(b) another officer, employee or agent of the college designated by the registrar or a deputy registrar for that purpose under section 4-1(3).

Transition of certified practice courses recognized under former Act

7-8 (1) Every certified practice course recognized by the board as a "BCCNM-approved certified practice course" within the meaning of Schedule H of the former bylaws immediately before the HPOA effective date is deemed to be recognized by the education program review committee under section 7-4 for the purpose of the corresponding certification program established for RN licensees or RPN licensees under section 7-2(1) or (2), for a period of time and subject to any terms or conditions specified by the registrar under subsection (3).

(2) Every specialized practice course recognized by the board immediately before the HPOA effective date, in accordance with the *Certified and Specialized Practices Course Review Policies* previously established by the board under the former Act, for the purpose of a midwife specialized practice certification that corresponds to a certification program established for midwife licensees under section 7-2(3) is deemed to be recognized by the education program review committee as a certified practice course under section 7-4 for the purpose of the corresponding certification program, for a period of time and subject to any terms or conditions specified by the registrar under subsection (3).

(3) For each certified practice course deemed to be recognized by the education program review committee under subsection (1) or (2), the registrar must specify

(a) the certified practice course's period of recognition, corresponding to the course recognition length approved by the board before the HPOA effective date in accordance with the *Certified and Specialized Practices Course Review Policies* previously established by the board under the former Act, and

(b) any terms or conditions imposed on the certified practice course, corresponding to any terms or conditions applicable to the course immediately before the HPOA effective date under the *Certified and Specialized Practices Course Review Policies* previously established by the board under the former Act.

Additional certification requirements

7-9 (1) In addition to the requirement under section 7-3(2)(a) for an applicant for certification in a certification program to complete a certified practice course recognized by the education program review committee or a course recognized by the registrar as equivalent, the registrar may establish additional requirements for applicants for certification or reinstatement of certification in each certification program to complete further education, training, experience or other qualifications recommended by a professional standards advisor under subsection (2).

(2) A professional standards advisor who is qualified is to give advice under section 361 of the Act with respect to practice standards for the designated health profession of nursing, psychiatric nursing or midwifery may recommend the establishment of additional certification requirements under subsection (1) that the professional standards advisor considers necessary to demonstrate an applicant's satisfactory achievement of the applicable certified practice competencies for a certification program for licensees in the applicable designated health profession.

(3) The registrar must ensure that any additional certification requirements established under subsection (1) in respect of each certification program are published on the college website.

Additional annual declaration requirements for certified licensees

7-10 In addition to the items specified in section 6-60(6), an annual declaration provided by a certified licensee under section 6-60(1) or (3) must be accompanied by

(a) any additional applicable annual fee for certified licensees set out in Schedule G, and

(b) information satisfactory to the college confirming

(i) the certified licensee's compliance with any additional applicable certified licensee currency requirement under section 11-18, and

(ii) the certified licensee's completion of a personal practice review that satisfies the additional personal practice review requirement for certified licensees under section 11-11.

Expiry of certification

7-11 (1) A certified licensee's certification in a certification program expires immediately upon the certified licensee ceasing to be an eligible licensee.

(2) If a certified licensee who is a practising licensee fails to pay any annual fee required by section 7-10(a) or fails to provide the information required by section 7-10(b) by the March 31 deadline to do so, their certification in each applicable certification program expires effective April 1.

(3) If a certified licensee who is a multijurisdictional licensee fails to pay any annual fee required by section 7-10(a) or fails to provide the information required by section 7-10(b) by the applicable deadline specified under section 6-60(3), their certification in each applicable certification program expires on the first day after that deadline.

Reinstatement of certification

7-12 (1) In this section, **"former certified licensee"** means an eligible licensee who previously held certification in a certification program established under section 7-2, or who previously held an equivalent certified practice designation or midwife specialized practice certification under the former Act.

(2) A former certified licensee may apply for reinstatement of their certification in the applicable certification program by providing a completed application to the registrar in the specified form, accompanied by any applicable fees set out in Schedule G.

(3) The registrar may reinstate the certification of an applicant under subsection (2) in the applicable certification program if the applicant is in good standing, and provides, or causes to be provided, information satisfactory to the college confirming

(a) that within the one-year period immediately preceding the date of their application, the applicant

(i) previously held certification in the applicable certification program or an equivalent certified practice designation or midwife specialized practice certification under the former Act, and engaged in the restricted activities authorized by that certification or certified practice designation, or

(ii) completed a certification program recognized by the education program review committee under section 7-4 for the purpose of the applicable certification program,

(b) the applicant's compliance with any additional applicable certified licensee currency requirement under section 11-18, and

(c) the applicant's completion of any incomplete personal practice review that is required to satisfy the additional personal practice review requirement for certified licensees under section 11-11.

PART 8 - PROFESSIONAL RESPONSIBILITIES

Division 1 – Standards and Ethics

Ethics standards and practice standards

8-1 All licensees must comply with all ethics standards and practice standards established by the board that are applicable to the practice of their designated health profession.

Establishment of ethics standards and practice standards

8-2 (1) Without limiting section 70 of the Act, the board

(a) must, by bylaw, establish ethics standards respecting all of the matters specified in section 70(2) of the Act, and

(b) may establish ethics standards respecting any other matters relating to licensees' practice of their designated health profession in a manner that is ethical.

(2) Without limiting section 72 of the Act, the board

(a) must, by bylaw, establish practice standards respecting all of the matters specified in section 72(3) of the Act and in sections 7-2(4), 10-2 and 10-3, and

(b) may establish practice standards respecting any other matters relating to the safe and competent practice by licensees of their designated health profession, including the establishment of standards, limits or conditions for the practice of the designated health profession by licensees.

(3) For the purposes of satisfying its duty under section 361 of the Act, the board may seek advice from a panel of the professional standards advisory committee appointed in accordance with section 3-15(10) before establishing, amending or repealing an ethics standard or practice standard.

(4) A bylaw establishing an ethics standard or practice standard may be included in these *BCCNM General Bylaws*, or may be adopted as a separate free-standing bylaw.

(5) Subject to section 538 of the Act,

(a) any standards of professional ethics that were established by bylaw under section 19(1)(l) of the former Act immediately before the HPOA effective date are deemed to be ethics standards established by the board under section 70 of the Act, and they continue to apply to licensees, with any necessary changes and so far as applicable, until they are amended, repealed or replaced by the board, and

(b) any standards, limits or conditions on the practice of a designated health profession governed by the college that were established by bylaw under section 19(1)(k) of the former Act immediately before the HPOA effective date are deemed to be practice standards established by the board under section 72 of the Act, and they continue to apply to licensees, with any

necessary changes and so far as applicable, until they are amended, repealed or replaced by the board.

(6) The registrar must

(a) maintain a record of all ethics standards and practice standards established under sections 70 and 72 of the Act in respect of the designated health professions governed by the college, and

(b) ensure that all ethics standards and practice standards described in paragraph (a) are published on the college website.

Generally accepted professional standards

8-3 (1) Without limiting the applicability of any ethics standards and practice standards established under sections 70 and 72 of the Act, a licensee must not provide health care services in a manner that exposes to a client to harm or a risk of harm if, in the circumstances, no reasonable and competent licensee would provide health care services in that manner having regard to relevant standards.

(2) Relevant standards under subsection (1) include uncodified standards that are generally accepted with the licensee's designated health profession and that are not superseded by any ethics standard or practice standard.

Division 2 – Use of Titles

General restriction on use of titles

8-4 (1) A licensee whose licence is not suspended may use a title that is reserved by the NMR for the exclusive use of licensees only if the licensee

(a) is in a class of licensure that is authorized by the NMR and this Division to use the title, and

(b) uses the title in a manner authorized by the bylaws.

(2) A licensee must not use any title that expresses or implies that they hold a licence in a class of licensure for which they do not hold a licence.

LPN licensee group

8-5 (1) A practising LPN licensee or multijurisdictional LPN licensee may use

(a) the title "nurse", "licensed practical nurse" or "practical nurse", or

(b) the abbreviation "LPN".

(2) A provisional LPN licensee may use

(a) the title "licensed practical nurse (provisional)", "provisional LPN" or "provisional nurse", or

(b) the abbreviation "LPN(P)".

(3) A temporary LPN (emergency) licensee may use

(a) the title “temporary licensed practical nurse”, “temporary LPN” or “temporary nurse” or

(b) the abbreviation “LPN(T)”.

RPN licensee group

8-6 (1) A practising RPN licensee or multijurisdictional RPN licensee may use

(a) the title “nurse”, “registered psychiatric nurse” or “psychiatric nurse”, or

(b) the abbreviation “RPN”.

(2) A provisional RPN licensee may use

(a) the title “registered psychiatric nurse (provisional)”, “provisional RPN” or “provisional nurse”, or

(b) the abbreviation “RPN(P)”.

(3) A temporary RPN (emergency) licensee may use

(a) the title “temporary registered psychiatric nurse”, “temporary RPN” or “temporary nurse”, or

(b) the abbreviation “RPN(T)”.

(4) An employed student psychiatric nurse licensee may use

(a) the title “employed student psychiatric nurse”, or

(b) the abbreviation “ESPN”.

RN licensee group

8-7 (1) A practising RN licensee or multijurisdictional RN licensee may use

(a) the title “nurse” or “registered nurse”, or

(b) the abbreviation “RN”.

(2) A provisional RN licensee may use

(a) the title “registered nurse (provisional)”, “provisional RN” or “provisional nurse”, or

(b) the abbreviation “RN(P)”.

(3) A practising LGN licensee may use

(a) the title “nurse” or “licensed graduate nurse”, or

(b) the abbreviation “LGN”.

(4) A provisional LGN licensee may use

(a) the title “licensed graduate nurse (provisional)”, “provisional LGN” or “provisional nurse”, or

(b) the abbreviation “LGN(P)”.

(5) A temporary RN (emergency) licensee may use

(a) the title “temporary registered nurse”, “temporary RN” or “temporary nurse”, or

(b) the abbreviation “RN(T)”.

(6) An employed student nurse licensee may use

(a) the title “employed student nurse”, or

(b) the abbreviation “ESN”.

NP licensee group

8-8 (1) A practising NP licensee may use

(a) the title “nurse practitioner”, “registered nurse practitioner”, “nurse” or “registered nurse”, or

(b) the abbreviation “NP”, “RN” or “RN-NP”.

(2) A provisional NP licensee may use

(a) the title “nurse practitioner (provisional)”, “registered nurse practitioner (provisional)”, “provisional NP”, “nurse” or “registered nurse”, or

(b) the abbreviation “NP(P)”, “RN” or “RN-NP(P)”.

(3) A temporary NP (emergency) licensee may use

(a) the title “temporary nurse practitioner”, “temporary NP” or “temporary nurse”, or

(b) the abbreviation “NP(T)”.

Midwife licensee group

8-9 (1) A practising midwife licensee may use

(a) the title “midwife” or “registered midwife”, or

(b) the abbreviation “RM”.

(2) A practising midwife licensee who is an Indigenous person may use the title “Indigenous midwife”.

(3) A provisional midwife licensee may use

(a) the title “midwife (provisional)”, “registered midwife (provisional)” or “provisional midwife”, or

(b) the abbreviation “RM(P)”.

(4) A temporary midwife (emergency) licensee may use

(a) the title “temporary midwife (emergency)” or “temporary registered midwife (emergency)”, or

(b) the abbreviation “RM(T)”.

(5) A non-practising midwife licensee may use a title or abbreviation specified in subsection (1) only in conjunction with the term “non-practising”.

Certified licensees

8-10 (1) A practising RN licensee or multijurisdictional RN licensee who holds certification in a certification program established under section 7-2(1) may use

(a) the title “certified registered nurse” or “registered nurse (certified)”,

(b) the abbreviation “RN(C)”, or

(c) another term or title authorized under Schedule D for the applicable certification program.

(2) A practising RPN licensee or multijurisdictional RPN licensee who holds certification in the certification program established under section 7-2(2) may use

(a) the title “certified registered psychiatric nurse” or “registered psychiatric nurse (certified)”,

(b) the abbreviation “RPN(C)”, or

(c) another term or title authorized under Schedule D for that certification program.

(3) A practising midwife licensee who holds certification in a certification program established under section 7-2(3) may use

(a) the title “certified midwife”, “certified registered midwife”, “midwife (certified)” or “registered midwife (certified)”,

(b) the abbreviation “RM(C)”, or

(c) another term or title authorized under Schedule D for the applicable certification program.

(4) A licensee who does not hold certification in a certification program established under section 7-2 must not use any term or title that expresses or implies that they hold such certification.

Division 3 – Marketing

Marketing

8-11 (1) In this section:

“advertisement” means the use of space or time in a public medium, or the use of a commercial publication such as a brochure or handbill, to communicate with the general public, or a segment thereof, for the purpose of promoting professional

services or products or enhancing the image of the licensee or advertiser if other than the licensee;

"marketing" includes

(a) an advertisement,

(b) any publication or communication in any medium with any client, prospective client or the public generally in the nature of an advertisement, promotional activity or material, a listing in a directory, a public appearance, or any other means by which the professional services of a designated health profession are promoted, and

(c) contact with a prospective client initiated by or under the direction of a licensee.

(2) Any marketing undertaken or authorized by a licensee respect of the licensee's professional services must not be

(a) false,

(b) inaccurate,

(c) likely to mislead the public or the recipient or intended recipient,

(d) unverifiable,

(e) contrary to the public interest in the practice of a designated health profession, or

(f) in bad taste, offensive, self-laudatory, or otherwise contrary to the honour and dignity of a designated health profession or maintenance of a high standard of professionalism.

(3) Marketing violates subsection (2) if it

(a) is calculated or likely to mislead or take advantage of the weakened state, either physical, mental or emotional, of the recipient or intended recipient,

(b) is likely to create in the mind of the recipient or intended recipient an unjustified expectation about the services the licensee can perform or provide or results which the licensee can achieve,

(c) implies that the licensee can obtain results

(i) not achievable by other licensees,

(ii) by improperly influencing a public body or official or any corporation, agency or person having an interest in the welfare of the recipient or intended recipient, or

(iii) by any other improper means,

(d) compares the quality of services provided by the licensee with those provided by

(i) another licensee, or

(ii) a person authorized to provide health care services under another enactment, or

(iii) practitioners of another health profession,

(e) makes claims of special skills that are not supported by the education and experience of the licensee, or announces or holds out that the licensee has special qualifications that they do not possess, or

(f) is for the purpose of marketing a product and

(i) the primary purpose of the licensee's activity is the sale of the product,

(ii) the product being sold is not used in the provision of professional services of a designated health profession practised by the licensee,

(iii) the licensee's practice is based on the use of a particular product which the client must purchase in order to use the licensee's professional services, or

(iv) the sale of the product results in financial or other profit for the licensee selling the product or any other individual, corporation or other entity, including the licensee's employer.

(4) A licensee who, in any advertisement, includes a statement of fees for a specific service

(a) must ensure that the statement sufficiently describes the fees and services so as to enable the recipient or intended recipient to understand the nature and extent of the services to be performed or provided and the cost to the client, and

(b) must not in the advertisement compare the fees charged by the licensee with those charged by another licensee of the college or a licensee or licensees of another regulatory college under the Act.

(5) Unless authorized by the board or otherwise under the Act or these bylaws, including Part 7 and section 8-10, a licensee

(a) must not use the term "specialist", "certified" or any similar designation suggesting a recognized special status or certification on any letterhead or business card or in any other marketing, and

(b) must take all reasonable steps to discourage the use, in relation to the licensee by another person, of the term "specialist", "certified" or any similar designation suggesting a recognized special status or certification in any marketing.

(6) A licensee must verify statements made in any of the marketing by, or on behalf of, or respecting the licensee when asked to do so by the college or an investigator.

(7) Licensees who limit their practices to certain aspects or areas of a designated health profession may state in any marketing the aspect or area to which their practice is restricted.

(8) A licensee must retain for one year after the date of publication or broadcast of any advertisement or brochure, and must provide to the college or an investigator upon request

(a) a copy of any such publication, including without limitation a publication made by use of email, the internet or any other electronic media,

(b) a recording or videotaping of any such broadcast made by use of radio, television or any other electronic media, and

(c) a written record of when and where the publication or broadcast was made.

(9) A licensee must not

(a) state publicly that they speak on behalf of the college unless they are expressly authorized by the board to state the official position of the college, or

(b) endorse or lend their name as a licensee, nurse or midwife, whether for reward or not, to the advertisement of any property, product, investment or service for sale to the public whatever its merits.

PART 9 - LICENSEE RECORDS

Division 1 – Definition

Definition

9-1 In this Part, **"client's representative"** means a person with legal authority to give, refuse or withdraw consent to health care on a client's behalf, including, as appropriate

(a) a "committee of the patient" under the *Patients Property Act*,

(b) the parent or guardian of a client under 19 years of age with parental responsibility to give, refuse or withdraw consent to health care for the child under section 41(f) of the *Family Law Act*,

(c) a representative authorized by a representation agreement under the *Representation Agreement Act* to make or help in making decisions on behalf of a client,

(d) a temporary substitute decision maker chosen under section 16 of the *Health Care (Consent) and Care Facility (Admission) Act*, or

(e) a substitute decision maker chosen under section 22 of the *Health Care (Consent) and Care Facility (Admission) Act*.

Division 2 – Collection of Client Personal Information

Authority to collect client personal information

9-2 A licensee in the course of practising a designated health profession governed by the college must not collect personal information about a client without the consent of the client unless

(a) the personal information relates directly to, and is necessary for, providing health care services to or for the client or for related administrative purposes, or

(b) the collection of the personal information is authorized under the bylaws, or otherwise authorized or required by law.

Source of client personal information

9-3 (1) Subject to subsection (2), a licensee must collect personal information about a client directly from the client.

(2) A licensee may collect personal information about a client from a source other than the client if

(a) the client has been made aware of the matters set out in section 9-4 and has authorized collection of the personal information from another source,

(b) the client is unable to provide consent and the licensee, having made the client's representative aware of the matters set out in section 9-4, collects the information from the client's representative or the client's representative authorizes collection from another source,

(c) collecting the personal information directly from the client would

(i) prejudice the best interests of the client,

(ii) defeat the purpose or prejudice the use for which the information is collected, or

(iii) risk the safety of any person,

(d) the collection is for the purpose of assembling a family or genetic history of a person and is collected directly from that person,

(e) the information is publicly available,

(f) the information will be used for statistical or research purposes and will not be published in a form that could reasonably be expected to identify the client, or

(g) the collection of personal information from a source other than the client is authorized under section 12 of PIPA or section 27 of FIPPA, as applicable, or otherwise authorized or required by law.

Notification of collection of client personal information

9-4 (1) A licensee who collects personal information directly from a client or the client's representative must take reasonable steps to ensure that the client or client's representative is aware of

(a) the fact that the personal information is being collected,

(b) the purpose for which the personal information is being collected,

(c) the intended recipients of the personal information,

(d) the legal authority for collecting the personal information if it has not been supplied voluntarily, and

(e) the consequences, if any, for the client if all or any part of the requested personal information is not provided.

(2) The steps referred to in subsection (1) must be taken before the personal information is collected or, if that is not practicable, as soon as reasonably practicable after the personal information is collected.

(3) A licensee is not required to take the steps referred to in subsection (1) if

(a) the licensee has taken those steps in relation to the collection, from the client or client's representative, of the same information or information of the same kind for the same or a related purpose, on a recent previous occasion,

(b) non-compliance is authorized by the client, or

(c) compliance would prejudice the interests of the client or defeat the purpose or prejudice the use for which the information is collected.

Division 3 – Use or Disclosure of Client Personal Information

Use of client personal information

9-5 A licensee may use personal information about a client only

(a) for the purpose of providing health care services to or for the client, or for a related administrative purpose,

(b) for a use consistent with a purpose specified in paragraph (a),

(c) if the client or the client's representative has consented to the use,

(d) for a purpose for which that information may be disclosed under section 9-6, or

(e) if the use is authorized under section 14 or 15 of PIPA or section 32 of FIPPA, as applicable, or otherwise authorized by or required law.

Disclosure of client personal information

9-6 A licensee must maintain confidentiality of a client's personal information, and may disclose that personal information only

(a) for the purpose of providing health care services to or for the client, or for a related administrative purpose,

(b) for a disclosure consistent with a purpose specified in paragraph (a),

(c) if the client or the client's representative has consented to the disclosure,

(d) for the purpose of complying with a subpoena, warrant or order issued or made by a court, person or body with legal authority to compel the production of information,

(e) to an employee of, or contractor providing services to, the licensee, if the information is necessary for the performance of the duties of, or for the protection of the health or safety of, the employee or contractor,

(f) to the licensee's legal counsel if necessary for use in civil, criminal or regulatory proceedings involving the licensee,

(g) to the college, a quality assurance assessor or other authorized quality assurance officer, an investigator, or any other person or body authorized by law to conduct audits, assessment, evaluations or investigations on behalf of the college, including without limitation an audit or required submission under section 11-7,

(h) for the purpose of responding to a complaint or other matter under investigation by the college, a discipline hearing, or a proceeding before the Health Professions Review Board,

(i) if the licensee has reasonable grounds to believe that there is a risk of significant harm to the health or safety of any person and that the disclosure of the information would reduce that risk,

(j) for the purpose of making a report to a regulatory college or another regulatory body, government agency or officer to which the licensee has a duty to report under the laws of British Columbia or another jurisdiction,

(k) for the purpose of providing notification to the next of kin or a friend of an injured, ill or deceased client, or

(l) if the disclosure is authorized under sections 17 to 22 of PIPA or sections 33 to 36 of FIPPA, as applicable, or otherwise authorized or required by law.

College access to records

9-7 Without limiting section 9-6(g), a licensee must make all records created or obtained in the course of providing health services, and any written or electronic records, available at reasonable hours for inspection by the college and must permit the college to make copies of records or to remove records temporarily for the purpose of making copies of them.

Definition of consistent purpose

9-8 A use or disclosure of personal information about a client is consistent with the purpose of providing health care services to or for the client, or a related administrative purpose, under section 9-5(b) or 9-6(b) if the use or disclosure has a reasonable and direct connection to either of those purposes.

Division 4 – Retention, Storage and Disposal of Client Care Records

Retention of client care records

9-9 (1) Except as otherwise required by law, a licensee must ensure that all records in the their custody or control containing information describing the care provided to a client are retained for a minimum period of 16 years following the later of

(a) the date of last entry, or

(b) the date the client reaches 19 years of age.

(2) A licensee who receives records containing information describing the care provided to a client that are transferred in accordance with section 9-11(1)(a) or 9-12(3) must retain those records in accordance with subsection (1).

Storage of client care records

9-10 (1) A licensee must ensure that records in their custody and control containing personal information about a client are stored in a safe and secure environment to ensure confidentiality regardless of the format in which they are stored.

(2) A licensee who has custody and control of records described in subsection (1) must have record management processes in place to regulate access to those records, and to ensure that individuals having access to those records are subject to written confidentiality requirements.

Transfer or disposal of client care records

9-11 (1) A licensee must ensure that records in their custody and control containing personal information about a client are disposed of only

(a) by transferring the record safely and securely

(i) to another licensee with a practising licence or a multijurisdictional licence in the same designated health profession,

(ii) with the consent of the client or the client's representative, to another health care practitioner or a health care agency,

(iii) to a person or organization retained by the transferring licensee to store records on their behalf in a manner that is secure and provides reasonable access for the duration of the minimum retention period required by section 9-9(1), or

(iv) to the client or the client's representative,

(b) in the case of information recorded electronically, by erasing or destroying the information securely and in a manner that ensures it cannot be reconstructed, or

(c) in the case of information contained in a physical record, by effectively destroying the record by use of a shredding device or in another manner that ensures the record cannot be reconstructed.

(2) A licensee must ensure that, if personal information is transferred to any person for processing, storage or disposal, a contract is made with that person that includes an undertaking by the recipient to maintain legally required access to, and the confidentiality and physical security of, the personal information.

Licensee ceasing to practise

9-12 (1) A licensee who ceases to practise for any reason must ensure that records in their custody and control containing personal information about clients are transferred or disposed of in accordance with section 9-11.

(2) Despite subsection (1), if records described in that subsection are subject to continued retention under section 9-9(1) at the time the licensee ceases to practise, those records must be transferred in accordance with section 9-11(1)(a).

(3) A licensee must make appropriate arrangements to ensure that, in the event that the licensee is unable to transfer or dispose of records described in subsection (1) due to the licensee's death or incapacity, those records will be transferred safely and securely to another licensee with a practising licence or multijurisdictional licence in the same designated health profession.

Notice to clients

9-13 A licensee who receives records containing personal information about a client transferred in accordance with section 9-11(1)(a) or 9-12(3) must notify the client of the transfer as soon as reasonably practicable.

Division 5 – Protection of Personal Information

Protection of personal information

9-14 A licensee who has custody and control of records containing personal information about clients

(a) must protect that personal information by making reasonable security arrangements against such risks as unauthorized access, collection, use, disclosure or disposal, and

(b) must take reasonable steps to ensure that a third party, including an employee or contractor of the licensee, does not access, collect, use, disclose, store or dispose of that personal information except in accordance with the requirements of this Part.

Unauthorized access, use, disclosure or disposal of personal information

9-15 A licensee who has custody and control of records containing personal information about clients must take steps to remedy any unauthorized access, use, disclosure or disposal of that personal information as soon as the breach is discovered, including but not limited to

(a) ensuring compliance with any applicable privacy breach requirements under the PIPA or FIPPA,

(b) taking steps to recover the personal information or to ensure its disposal if it cannot be recovered,

(c) taking steps to ensure that any remaining personal information is secure,

(d) investigating how the breach occurred and modifying existing security arrangements to prevent a re-occurrence of the breach, and

(e) providing notification of the breach to

(i) any individual affected by the breach, including any affected clients and any other affected health care professionals,

(ii) the Office of the Information and Privacy Commissioner for British Columbia, and

(iii) law enforcement officials if there is reason to believe that criminal action may have caused or contributed to the breach.

Division 6 – Client Access

Client access to client care records

9-16 (1) This section applies if

(a) a client of a licensee or the client's representative makes a written request for access to personal information about the client that is contained in records within the licensee's custody and control, and

(b) Part 2 of FIPPA does not apply to request.

(2) Subject to subsections (3) to (7) and (12), a licensee who receives a request described in subsection (1) must as soon as reasonably practicable and, in any event, within 30 business days after receiving the request, give the client or client's representative access to the records within the licensee's custody and control that contain the requested personal information by giving the client or client's representative the opportunity to examine or make copies of the records.

(3) A licensee may extend the time to respond to a request described in subsection (1) in accordance with section 31(2) of PIPA.

(4) If it is reasonably practicable to do so, a licensee must sever a record before giving the client or client's representative access to it under subsection (2) to remove information the disclosure of which would

(a) in the licensee's opinion, give rise to a significant likelihood of

(i) a substantial adverse effect on the physical, mental or emotional health of the client, or

(ii) harm to another individual,

(b) reveal personal information about another individual, without that individual's consent,

(c) contravene subsection (9), or

(d) be otherwise prohibited by section 23(4) of PIPA.

(5) A licensee may sever a record before giving the client or client's representative access to it under subsection (2) to remove

(a) information described in section 23(3) of PIPA, or

(b) other information that does not constitute personal information about the client and is unrelated to the provision of health care services to the client.

(6) If it is not reasonably practicable to sever a record to remove information described in subsection (4)(a), (b) or (d), the licensee must refuse to give the client or client's representative access to the record.

(7) If it is not reasonably practicable to sever a record to remove information described in section 23(3) of PIPA, the licensee may refuse to give the client or client's representative access to the record.

(8) Subject to subsections (4) to (7), a client under 19 years of age may be given access to a record under subsection (2) if, in the licensee's opinion, the client is capable of understanding the subject matter of the record.

(9) Unless authorized by the client, a licensee must not give a parent or guardian of a client who is under 19 years of age access to any record containing information about health care services provided to the client without the consent of the parent or guardian in accordance with section 17 of the *Infants Act*.

(10) If, in accordance with this section, a licensee refuses to give a client or the client's representative access to a record or information contained in a record, the licensee must give the client or client's representative a written explanation of the reason for that refusal.

(11) Subject to subsection (12), if a licensee gives a client or the client's representative access to a record under subsection (2) and the client or client's representative requests a copy of the record, a copy must be provided if it can reasonably be reproduced.

(12) A licensee may charge a client or the client's representative a reasonable fee for giving them access to records under this section that must be limited to reasonable photocopying charges to reproduce copies of the record and any other additional costs actually and reasonably incurred by the licensee to provide access to the record.

PART 10 – DELEGATION AND STUDENTS

Definitions

10-1 In this Part, the following definitions apply:

"LPN student" means a student who is enrolled in an LPN education program that is recognized by the education program review committee for the purpose of practising LPN licensure under under section 6-6 or deemed to be equivalent under section 6-11;

"midwifery student" means a student who is enrolled in a midwifery education program that is recognized by the education program review committee for the purpose of practising midwifery licensure under under section 6-6 or deemed to be equivalent under section 6-11

"NP student" means a student who is enrolled in an NP education program that is recognized by the education program review committee for the purpose of practising NP licensure under under section 6-6 or deemed to be equivalent under section 6-11;

"regulatory supervision" means supervision provided under section 32(b)(i) of the Act or this Part for an LPN student, RPN student, RN student, NP student or midwifery student while the student is

(a) performing a restricted activity or another aspect of practice requiring professional knowledge, skills, ability and judgment, whether or not the minister has identified that aspect of practice for the purposes of section 29 of the Act, or

(b) using a title described in section 30 of the Act;

"RN student" means a student who is enrolled in an RN education program that is recognized by the education program review committee for the purpose of practising RN licensure under under section 6-6 or deemed to be equivalent under section 6-11;

"RPN student" means a student who is enrolled in an RPN education program that is recognized by the education program review committee for the purpose of practising RPN licensure under under section 6-6 or deemed to be equivalent under section 6-11.

Delegation

10-2 (1) The board must, by bylaw, make practice standards authorizing any permitted delegation by licensees of the performance of restricted activities to unregulated care providers under section 74 of the Act, and establishing standards, limits and conditions for such delegation.

(2) Without limiting subsection (1), a practice standard made under subsection (1) must address the matters described in section 74(3)(a) of the Act.

Regulatory supervision of students

10-3 (1) The board must, by bylaw, make practice standards establishing standards, limits and conditions for licensees to provide regulatory supervision for LPN students, RPN students, RN students, NP students or midwifery students.

(2) Regulatory supervision for LPN students, RPN students, RN students, NP students or midwifery students may be provided by

(a) a practising licensee or a multijurisdictional licensee, or

(b) an individual who is a member of a class of licensees of another regulatory college, if

(i) the student's education program has policies that authorize members of that class of licensees to provide that regulatory supervision, and that ensure that students comply with the applicable limits and conditions in sections 10-4 to 10-8 when they perform activities or use titles under the supervision of a licensee of another regulatory college, and

(ii) the individual satisfies any applicable conditions or requirements under the education program's policies, including any required academic qualifications.

(3) For the purposes of section 32(c) of the Act, an LPN student, RPN student, RN student, NP student or midwifery student must comply with all applicable limits and conditions specified in section 10-4, 10-5, 10-6, 10-7 or 10-8, as the case may be, when performing an activity described in section 29 of the Act or using a title described in section 30 of the Act under the authority of section 32 of the Act.

(4) Subsection (3) and sections 10-4 to 10-8 do not limit the authority of a student who is also a licensee to provide any services or use any title that they are authorized to provide or use by virtue of their licensure, including

(a) the authority of an employed student psychiatric nurse licensee to provide psychiatric nursing services in the course of their employment under section 6-54(4)(a) or to use a title or abbreviation specified in section 8-6(4), or

(b) the authority of an employed student nurse licensee to provide nursing services in the course of their employment under section 6-55(5)(a) or to use a title or abbreviation specified in section 8-7(6).

Limits and conditions on LPN students

10-4 (1) Subject to section 10-3(4), an LPN student must comply with the following limits and conditions when performing an activity described in section 29 of the Act:

(a) the activity must be provided while the LPN student is in the process of fulfilling the requirements of their LPN education program;

(b) the activity must be within the scope of practice of a practising LPN licensee under the NMR;

(c) the LPN student must be under the regulatory supervision of a licensee of the college or another regulatory college who

(i) is authorized under section 10-3 to provide regulatory supervision for LPN students,

(ii) is authorized under the NMR or, if applicable, the other regulatory college's designation regulation to perform the activity, and

(iii) has determined that the LPN student has attained sufficient competence to safely perform the activity under the level of supervision the supervising licensee considers necessary;

(d) the LPN student must comply with all standards, limits and conditions that apply to the performance of the activity by a practising LPN licensee as if they were a practising LPN licensee;

(e) subject to paragraph (d), the LPN student must comply with all directions given by the supervising licensee described in paragraph (c) respecting the LPN student's performance of the activity.

(2) Subject to section 10-3(4), an LPN student

(a) may use the title "practical nursing student" or "student practical nurse", or the abbreviation "SPN", and must not use a title reserved by the NMR for the exclusive use of licensees in any other manner, and

(b) must not use any other title that expresses or implies that they hold a licence in a class of licensure for which they do not hold a licence.

Limits and conditions on RPN students

10-5 (1) Subject to section 10-3(4), an RPN student must comply with the following limits and conditions when performing an activity described in section 29 of the Act:

(a) the activity must be provided while the RPN student is in the process of fulfilling the requirements of their RPN education program;

(b) the activity must be within the scope of practice of a practising RPN licensee under the NMR;

(c) the RPN student must be under the regulatory supervision of a licensee of the college or another regulatory college who

(i) is authorized under section 10-3 to provide regulatory supervision for RPN students,

(ii) is authorized under the NMR or, if applicable, the other regulatory college's designation regulation to perform the activity, and

(iii) has determined that the RPN student has attained sufficient competence to safely perform the activity under the level of supervision the supervising licensee considers necessary;

(d) the RPN student must comply with all standards, limits and conditions that apply to the performance of the activity by a practising RPN licensee as if they were a practising RPN licensee;

(e) subject to paragraph (d), the RPN student must comply with all directions given by the supervising licensee described in paragraph (c) respecting the RPN student's performance of the activity.

(2) Subject to section 10-3(4), an RPN student

(a) may use the title "psychiatric nursing student" or "student psychiatric nurse", or the abbreviation "SPsycN", and must not use a title reserved by the NMR for the exclusive use of licensees in any other manner, and

(b) must not use any other title that expresses or implies that they hold a licence in a class of licensure for which they do not hold a licence.

Limits and conditions on RN students

10-6 (1) Subject to section 10-3(4), an RN student must comply with the following limits and conditions when performing an activity described in section 29 of the Act:

(a) the activity must be provided while the RN student is in the process of fulfilling the requirements of their RN education program;

(b) the activity must be within the scope of practice of a practising RN licensee under the NMR;

(c) the RN student must be under the regulatory supervision of a licensee of the college or another regulatory college who

(i) is authorized under section 10-3 to provide regulatory supervision for RN students,

(ii) is authorized under the NMR or, if applicable, the other regulatory college's designation regulation to perform the activity, and

(iii) has determined that the RN student has attained sufficient competence to safely perform the activity under the level of supervision the supervising licensee considers necessary;

(d) the RN student must comply with all standards, limits and conditions that apply to the performance of the activity by a practising RN licensee as if they were a practising RN licensee;

(e) subject to paragraph (d), the RN student must comply with all directions given by the supervising licensee described in paragraph (c) respecting the RN student's performance of the activity.

(2) Subject to section 10-3(4), an RN student

(a) may use the title "nursing student" or "student nurse", or the abbreviation "SN", and must not use a title reserved by the NMR for the exclusive use of licensees in any other manner, and

(b) must not use any other title that expresses or implies that they hold a licence in a class of licensure for which they do not hold a licence.

Limits and conditions on NP students

10-7 (1) Subject to section 10-3(4), an NP student must comply with the following limits and conditions when performing an activity described in section 29 of the Act:

(a) the activity must be provided while the NP student is in the process of fulfilling the requirements of their NP education program;

(b) the activity must be within the scope of practice of a practising NP licensee under the NMR;

(c) the NP student must be under the regulatory supervision of a licensee of the college or another regulatory college who

(i) is authorized under section 10-3 to provide regulatory supervision for NP students,

(ii) is authorized under the NMR or, if applicable, the other regulatory college's designation regulation to perform the activity, and

(iii) has determined that the NP student has attained sufficient competence to safely perform the activity under the level of supervision the supervising licensee considers necessary;

(d) the NP student must comply with all standards, limits and conditions that apply to the performance of the activity by a practising NP licensee as if they were a practising NP licensee;

(e) subject to paragraph (d), the NP student must comply with all directions given by the supervising licensee described in paragraph (c) respecting the NP student's performance of the activity.

(2) Subject to section 10-3(4), an NP student

(a) may use the title "student nurse practitioner" or "student nurse", or the abbreviation "SNP", and must not use a title reserved by the NMR for the exclusive use of licensees in any other manner, and

(b) must not use any other title that expresses or implies that they hold a licence in a class of licensure for which they do not hold a licence.

Limits and conditions on midwifery students

10-8 (1) Subject to section 10-3(4), a midwifery student must comply with the following limits and conditions when performing an activity described in section 29 of the Act:

(a) the activity must be provided while the midwifery student is in the process of fulfilling the requirements of their midwifery education program;

(b) the activity must be within the scope of practice of a practising midwife licensee under the NMR;

(c) the midwifery student must be under the regulatory supervision of a licensee of the college or another regulatory college who

(i) is authorized under section 10-3 to provide regulatory supervision for midwifery students,

(ii) is authorized under the NMR or, if applicable, the other regulatory college's designation regulation to perform the activity, and

(iii) has determined that the midwifery student has attained sufficient competence to safely perform the activity under the level of supervision the supervising licensee considers necessary;

(d) the midwifery student must comply with all standards, limits and conditions that apply to the performance of the activity by a practising midwife licensee as if they were a practising midwife licensee;

(e) subject to paragraph (d), the midwifery student must comply with all directions given by the supervising licensee described in paragraph (c) respecting the midwifery student's performance of the activity.

(2) Subject to section 10-3(4), a midwifery student

(a) may use the title "midwifery student" or "student midwife", or the abbreviation "SMW", and must not use a title reserved by the NMR for the exclusive use of licensees in any other manner, and

(b) must not use any other title that expresses or implies that they hold a licence in a class of licensure for which they do not hold a licence.

PART 11 - QUALITY ASSURANCE

Definitions

11-1 In this Part, the following definitions apply:

"certified licensee" has the same meaning as in Part 7;

"certified licensee currency requirement" has the same meaning as in Part 7;

"former certified licensee" has the same meaning as in Part 7;

"former practising LGN licensee" has the same meaning as in section 6-38;

"former practising LPN licensee" has the same meaning as in section 6-21;

"former practising midwife licensee" has the same meaning as in section 6-49;

"former practising NP licensee" has the same meaning as in section 6-44;

"former practising RN licensee" has the same meaning as in section 6-34;

"former practising RPN licensee" has the same meaning as in section 6-27;

"quality assurance program" means the quality assurance program established under section 11-2(1);

"quality assurance working group" means an advisory working group appointed under section 11-3.

Quality assurance program, policies and procedures

11-2 (1) The registrar must establish and administer a quality assurance program that encompasses all designated health professions governed by the college.

(2) The registrar must establish a policy on quality assurance assessments to provide guidance for the conduct of quality assurance assessments, including guidance to minimize disruption to the ordinary course of licensees providing health care services to their clients.

(3) The registrar must establish and maintain non-exhaustive lists, including profession-specific lists where appropriate, concerning

(a) types of clinical or other evaluations,

(b) recognized education or training courses,

(c) cultural safety, Indigenous cultural safety, anti-racism and anti-discrimination courses, reference materials or other resources, and

(d) other resources, which may include consultants, for supporting and promoting awareness of reconciliation with Indigenous peoples, the *United Nations Declaration of the Rights of Indigenous Peoples* and the *Declaration on the Rights of Indigenous Peoples Act*, and the need to

address racism and anti-racism issues that are specific to Indigenous peoples,

which a quality assurance assessor may consult when making recommendations relating to an individual performance matter under section 100 of the Act, or to remedy issues of professional performance across multiple licensees or within a class of licensees under section 101 of the Act.

(4) The registrar may establish additional guidelines, policies and procedures relating to the quality assurance program, including, for greater certainty, guidelines, policies or procedures respecting any of the following:

(a) licensees' cooperation with quality assurance assessments, including requirements that licensees are expected to meet in order to comply with their duty under section 74(c) of the Act to participate in any aspect of a quality assurance assessment authorized under section 99(2) of the Act or section 11-9;

(b) requirements that licensees are expected to meet in order to satisfy any component of the personal practice review requirement described in section 11-10(3);

(c) exemptions from, or modification of, any component of the personal practice review requirement, as contemplated by section 11-10(6);

(d) criteria for determining qualifying hours that are deemed to satisfy the LPN currency requirement, RPN currency requirement, RN currency requirement, NP currency requirement or midwife currency requirement, including any requirement that the number of qualifying hours specified in any provision of sections 11-13 to 11-17 must include a minimum number of hours in clinical practice;

(e) specifying alternative criteria or requirements for satisfying the LPN currency requirement, RPN currency requirement, RN currency requirement, NP currency requirement or midwife currency requirement for the purposes of section 11-13(1)(b) or (2)(a), 11-14(1)(b) or (2)(b), 11-15(1)(b) or (2)(b), 11-16(1)(b) or (2)(b) or 11-17(1)(b) or (2)(b);

(f) criteria or requirements that a practising midwife licensee or provisional midwife licensee is expected to meet to satisfy the midwife consolidation requirement under section 11-20.

Quality assurance working group

11-3 (1) The registrar may appoint an advisory working group under section 3-9 as a quality assurance working group to provide guidance for the administration and operation of the quality assurance program.

(2) The composition of the quality assurance working group

(a) may include, but is not limited to, employees of the college, and

(b) must include individuals with relevant professional expertise, including profession-specific expertise where appropriate.

(3) The quality assurance working group may make recommendations to the registrar relating to the administration and operation of the quality assurance program, including but not limited to recommendations respecting any of the following:

(a) enacting, establishing, amending or repealing bylaws, guidelines, policies or procedures relating to the quality assurance program;

(b) retaining, employing or dismissing individuals to act at quality assurance assessors;

(c) training, assistance and support for quality assurance assessors;

(d) the content of lists established and maintained by the registrar under section 11-2(3);

(e) enacting, establishing, amending or repealing standards or guidelines relating to issues of professional performance across multiple licensees or within a class of licensees.

Quality assurance assessor qualifications

11-4 (1) An individual retained or employed under section 363 of the Act to exercise the powers and perform the duties of a quality assurance assessor must

(a) hold current licensure in good standing as a practising licensee,

(b) possess training, experience or expertise satisfactory to the registrar in clinical practice or peer review, and in the subject matter of any quality assurance assessments assigned to them, and

(c) possess any additional qualification required under subsection (2).

(2) The registrar must establish and maintain a list of the qualifications required to conduct quality assurance assessments for each designated health profession governed by the college.

(3) Subsections (1) and (2) do not limit the registrar's discretion to refuse to retain or employ any individual as a quality assurance assessor, or to dismiss a quality assurance assessor, either generally or in specific circumstances.

Quality assurance officers

11-5 For the purposes of paragraph (b) of the definition of "quality assurance officer" in section 1 of the Act, the registrar may authorize an employee of the college who is not a quality assurance assessor but is a member of the college's quality assurance program staff to obtain or disclose information with respect to the quality assurance assurance program and quality assurance assessments.

Duty to maintain quality assurance records

11-6 (1) Every licensee must maintain, during each calendar year, adequate supporting records to document their compliance with applicable quality assurance requirements under this Part in the calendar year.

(2) Every licensee must retain the records described in subsection (1)

(a) for at least three years after the end of each calendar year, or

(b) for any longer period required under section 11-19 for retention of records described in that section.

Verification of quality assurance activities

11-7 (1) The registrar may cause audits of samples of licensees to be conducted as the registrar considers necessary or appropriate to verify their compliance with applicable quality assurance requirements under this Part.

(2) The registrar may require a licensee to submit information

(a) necessary to determine whether the licensee has met any applicable quality assurance requirements under this Part, or

(b) as part of an audit under subsection (1).

Selection of licensees for quality assurance assessment

11-8 (1) This section applies to licensees in a class of practising licensees, provisional licensees or multijurisdictional licensees only.

(2) In addition to the circumstances described in section 99(1)(a) to (c) of the Act, a quality assurance assessor may conduct a quality assurance assessment of a licensee who is selected by the college

(a) by a non-random selection process designed to ensure or promote that every licensee, or every licensee in a specific class, periodically undergoes a quality assurance assessment, or

(b) on the recommendation of the registrar

(i) based on an assessment of the risk presented by a class of licensees, or by types of health care services provided by licensees, or by a class established on any other basis, or

(ii) on any other basis other than for purposes of an investigation or a disciplinary proceeding.

(3) A licensee selected for a quality assurance assessment in accordance with section 99(1)(a) to (c) of the Act or subsection (2) must cooperate with the conduct of the quality assurance assessment and complete the assessment as directed by the quality assurance assessor in accordance with sections 99(2) and 103(1)(b) of the Act and section 11-9.

Methods of quality assurance assessment

11-9 In addition to the methods of assessment in section 99(2)(a) to (c) of the Act, a quality assurance assessor may, for purposes of conducting a quality assurance assessment of a licensee, do any of the following:

(a) contact, or direct another quality assurance officer to contact, the licensee's work peers, including employers, supervisors, professional colleagues and co-workers, to gather information in confidence, including but not limited to their knowledge,

observations, opinions, recommendations and evaluations pertaining to the licensee's professional performance, employment, or occupational or educational history;

(b) contact, or direct another quality assurance officer to contact, the licensee's clients or their family members to gather information in confidence, including but not limited to their knowledge, observations, opinions, recommendations and evaluations pertaining to the licensee's professional performance, employment, or occupational or educational history;

(c) collect, or direct another quality assurance officer to collect, information from any individual referred to in paragraph (a) or (b), with that individual's consent, for the purposes described in paragraph (a) or (b);

(d) collect, or direct another quality assurance officer to collect, third party documentation and records pertaining to the licensee's professional performance;

(e) review the licensee's history of professional activities, including but not limited to the licensee's patterns and processes, if any, of assessment, diagnostic testing, prescribing, diagnosis, treatment, charting, care planning and management of care;

(f) interview or engage in discussions with the licensee pertaining to the licensee's professional practice;

(g) require that the licensee undergo a specific clinical skills assessment process;

(h) conduct an on-site visit to the licensee's place of practice;

(i) require that the licensee

(i) engage in a practice reflection,

(ii) conduct a critical chart review, or

(iii) complete one or more elements of a personal practice review under section 11-10,

and engage in discussion with the quality assurance assessor about that exercise;

(j) require that the licensee provide contact information for selected individuals, if any, referred to in paragraph (a) or (b) who are willing to provide feedback under paragraph (a) or (b);

(k) require the licensee to comply with

(i) the policy on quality assurance assessments under section 11-2(2), and any other applicable policies and procedures established under section 11-2(4) respecting the conduct of quality assurance assessments,

(ii) any form or manner required by or under the policies and procedures described in subparagraph (i) for the purpose of completing an assessment or aspects of an assessment, and

(iii) any applicable deadlines imposed by or under the policies and procedures described in subparagraph (i) for completing the assessment or aspects of the assessment.

Personal practice review

11-10 (1) Every practising licensee must annually satisfy the personal practice review requirement established under this section.

(2) A multijurisdictional licensee must annually satisfy the personal practice review requirement established under this section if they hold certification in one or more certification programs established under section 7-2.

(3) To satisfy the personal practice review requirement, a practising licensee or a multijurisdictional licensee described in subsection (2) must do all of the following during each one-year period ending March 31:

(a) complete a confidential self-assessment of their practice of practical nursing, psychiatric nursing, nursing, nursing as a nurse practitioner, or midwifery, as applicable;

(b) seek and receive peer feedback on their practice of practical nursing, psychiatric nursing, nursing, nursing as a nurse practitioner, or midwifery, as applicable, or, if the licensee does not have access to peers who can provide feedback, complete a practice reflection;

(c) develop and implement a professional development plan;

(d) evaluate the impact of their professional development plan on their practice of practical nursing, psychiatric nursing, nursing, nursing as a nurse practitioner, or midwifery, as applicable;

(e) if the licensee is an NP licensee, complete a critical chart review;

(f) if the licensee is a midwife licensee, complete midwifery case reviews.

(4) If a practising LPN licensee, practising RPN licensee, practising RN licensee, practising LGN licensee, practising NP licensee or practising midwife licensee has not satisfied the personal practice review requirement under this section at the time their practising licence expires under section 6-66(3), they must satisfy their incomplete personal practice review requirement before their practising licence may be reinstated.

(5) A practising licensee or a former practising licensee described in subsection (4) must do the things required under subsection (3)

(a) in accordance with any applicable policies and procedures established under section 11-2(4),

(b) using any applicable practice standards and ethics standards, and any other documents or materials authorized or required for those purposes under the policies and procedures described in paragraph (a),

(c) in a form or manner authorized or required by or under the policies described in paragraph (a), and

(d) by any applicable deadlines imposed by or under the policies and procedures described in paragraph (a) for completing any aspect of the personal practice review requirement.

(6) Despite subsections (1) to (5), the registrar may exempt a licensee, an applicant for reinstatement, or a group of licensees or applicants for reinstatement from one or more requirements under those subsections, or impose modified requirements on the licensee, applicant, or group of licensees or applicants, in accordance with any applicable policies and procedures established under section 11-2(4).

Additional personal practice review requirement for certified licensees

11-11 Every practising licensee or multijurisdictional licensee holding certification in one or more certification programs established under section 7-2 must include at least one example relating to each applicable certification program in their professional development plan under section 11-10(3)(c).

Conduct of quality assurance assessments

11-12 (1) Without limiting section 4-8, the registrar may require a quality assurance assessor to complete a conflict of interest check in accordance with the *Conflict of Interest Policy for College Employees* before conducting a quality assurance assessment of a licensee.

(2) At the commencement of a quality assurance assessment of a licensee, a quality assurance assessor who must advise the licensee of

(a) the power of the quality assurance assessor and other quality assurance officers under section 103(1) of the Act to notify the registrar of a licensee's interference with the conduct of a quality assurance assessment,

(b) the powers and duties of the quality assurance assessor and other quality assurance officers respecting quality assurance information under sections 102 and 103 of the Act, and

(c) the exceptions to the confidentiality of quality assurance information under sections 104 and 105 of the Act.

(3) A quality assurance assessor conducting a quality assurance assessment must not observe a licensee while the licensee is providing a health care service to a client unless

(a) the client's consent is obtained in advance, or

(b) the service is being provided in a public setting.

LPN currency requirement

11-13 (1) A practising LPN licensee, provisional LPN licensee or multijurisdictional LPN licensee satisfies the LPN currency requirement only if

(a) they have engaged in the practice of practical nursing for a cumulative total of not fewer than 1,125 qualifying hours within the five-year period immediately preceding the applicable deadline to provide their completed annual declaration to the college under section 6-60(1), (2) or (3), as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

(2) A former practising LPN licensee who applies to the college for reinstatement of their practising licensure or an applicant for temporary LPN (emergency) licensure satisfies the LPN currency requirement only if

(a) they have engaged in the practice of practical nursing for a cumulative total of not fewer than 1,125 qualifying hours within the five-year period immediately preceding the date of their application, as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

RPN currency requirement

11-14 (1) A practising RPN licensee, provisional RPN licensee or multijurisdictional RPN licensee satisfies the RPN currency requirement only if

(a) they have engaged in the practice of psychiatric nursing for a cumulative total of not fewer than 1,400 qualifying hours within the five-year period immediately preceding the applicable deadline to provide their completed annual declaration to the college under section 6-60(1), (2) or (3), as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

(2) A former practising RPN licensee who applies to the college for reinstatement of their practising licensure or an applicant for temporary RPN (emergency) licensure satisfies the RPN currency requirement only if

(a) they have engaged in the practice of psychiatric nursing for a cumulative total of not fewer than 1,400 qualifying hours within the five-year period immediately preceding the date of their application, as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

RN currency requirement

11-15 (1) A practising RN licensee, practising LGN licensee, practising NP licensee, provisional RN licensee, provisional LGN licensee, provisional NP licensee or multijurisdictional RN licensee satisfies the RN currency requirement only if

(a) they have engaged in the practice of nursing for a cumulative total of not fewer than 1,125 qualifying hours within the five-year period immediately preceding the applicable deadline to provide their completed annual declaration to the college under section 6-60(1), (2) or (3), as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

(2) A former practising RN licensee, former practising LGN licensee or former practising NP licensee who applies to the college for reinstatement of their practising licensure or an applicant for temporary RN (emergency) licensure or temporary NP (emergency) licensure satisfies the RN currency requirement only if

(a) they have engaged in the practice of nursing for a cumulative total of not fewer than 1,125 qualifying hours within the five-year period immediately preceding the date of their application, as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

NP currency requirement

11-16 (1) A practising NP licensee or provisional NP licensee satisfies the NP currency requirement only if, in addition to satisfying the RN currency requirement under section 11-15(1),

(a) they have engaged in the practice of nursing as a nurse practitioner for a cumulative total of not fewer than 900 qualifying hours, excluding any hours of nursing practice counted towards satisfaction of the RN currency requirement, within the three-year period immediately preceding the applicable deadline to provide their completed annual declaration to the college under section 6-60(1) or (2), as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

(2) A former practising NP licensee who applies to the college for reinstatement of their practising licensure or an applicant for temporary NP (emergency) licensure satisfies the NP currency requirement only if, in addition to satisfying the RN currency requirement under section 11-15(2),

(a) they have engaged in the practice of nursing as a nurse practitioner for a cumulative total of not fewer than 900 qualifying hours, excluding any hours of nursing practice counted towards satisfaction of the RN currency requirement, within the three-year period immediately preceding the date of their application, as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

Midwife currency requirement

11-17 (1) Subject to subsection (3), a practising midwife licensee or provisional midwife licensee satisfies the midwife currency requirement only if

(a) they have engaged in the practice of midwifery for a cumulative total of not fewer than 900 qualifying hours within the three-year period immediately preceding the applicable deadline to provide their completed annual declaration to the college under section 6-60(1) or (2), as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

(2) A former practising midwife licensee who applies to the college for reinstatement of their practising licensure or an applicant for temporary midwife (emergency) licensure satisfies the midwife currency requirement only if

(a) they have engaged in the practice of midwifery for a cumulative total of not fewer than 900 qualifying hours within the three-year period immediately preceding the date of their application, as determined in accordance with criteria specified in an applicable policy under section 11-2(4), or

(b) they satisfy applicable alternative criteria or requirements, if such alternative criteria or requirements are specified in a policy under section 11-2(4).

(3) The midwife currency requirement established by subsection (1) for practising midwife licensees and provisional midwife licensees only applies in respect of annual declarations that are due on or after March 31, 2029.

Additional currency requirements for certified licensees

11-18 (1) Without limiting sections 11-14, 11-15 and 11-17, the registrar may recommend, for board approval, conditions and requirements to be met by certified licensees licensee holding certification in a certification program established under section 7-2 to demonstrate currency in their performance of restricted activities authorized by that certification program.

(2) A certified licensee holding certification in a certification program or an applicant for reinstatement of certification in a certification program satisfies the certified licensee currency requirement for that certification program only if they satisfy all applicable conditions and requirements approved by the board under subsection (1).

Practice currency records

11-19 (1) This section does not apply to temporary (emergency) licensees, employed student licensees or non-practising midwife licensees.

(2) Every LPN licensee, RPN licensee, RN licensee, LGN licensee and NP licensee must maintain supporting records to document their practice hours qualifying to be counted towards satisfaction of the LPN currency requirement, the RPN currency requirement or the RN currency requirement, as applicable, for not less than five years following the end of the calendar year to which a specific record or entry relates.

(3) Without limiting the records they are required to maintain under subsection (2), every NP licensee must also maintain any additional supporting records to document their practice hours qualifying to be counted towards satisfaction of the NP currency requirement for not less than three years following the end of the calendar year to which a specific record or entry relates.

(4) Every midwife licensee must maintain supporting records to document their practice hours qualifying to be counted towards satisfaction of the midwife currency requirement for not less than three years following the end of the calendar year to which a specific record or entry relates.

(5) A certified licensee must maintain supporting records to document their satisfaction of any applicable certified licensee currency requirement for a period of time specified by the board for that purpose.

(6) Without limiting section 11-7, the registrar may audit licensees to ensure the accuracy and truthfulness of practice hours or other information reported by them to satisfy any applicable currency requirement in sections 11-13 to 11-18.

(7) If the registrar has reasonable grounds to believe that a licensee has inaccurately or falsely reported practice hours or other information reported to satisfy an applicable currency requirement, the registrar may do one or more of the following:

(a) recommend that the quality assurance program conduct a quality assurance assessment of the licensee;

(b) report their belief and reasons to the licence committee;

(c) make a regulatory complaint under section 119 of the Act;

(d) exercise other relevant powers under the Act or bylaws.

Midwife consolidation requirement

11-20 (1) Subject to subsection (2) and any additional criteria or requirements specified in an applicable policy under section 11-2(4), a practising midwife licensee or provisional midwife licensee satisfies the midwife consolidation requirement only if they attend a total of 40 births within the three-year period immediately following their initial grant of licensure, including

(a) at least ten hospital births as a primary midwife, and

(b) at least ten out-of-hospital births as a primary midwife.

(2) Births attended as the equivalent of a practising midwife licensee or provisional midwife licensee in another Canadian jurisdiction, including births attended prior to a practising midwife licensee or provisional midwife licensee's initial grant of licensure in British Columbia, may be counted towards the minimum numbers of births required by subsection (1).

PART 12 - PUBLIC PROTECTION

Division 1 – Discipline for Administrative Matters

Registrar's authority

12-1 (1) The registrar is authorized to dispose of an administrative matter under section 109(1)(c) or (d) of the Act by making a disciplinary order described in section 270(1)(a) or (b) and (2) or section 271(1)(a) of the Act.

(2) Before disposing of an administrative matter under section 109(1)(b), (c) or (d) of the Act, the registrar must give the respondent an opportunity to be heard by notifying them of the proposed disposition and inviting them to provide written submissions under section 380(2)(a) of the Act before making a decision.

Monetary penalty for administrative matters

12-2 Subject to the regulations, the maximum amount of a monetary penalty for an administrative matter under section 109(1)(d) of the Act is $100,000.

Information to respondent

12-3 As soon as reasonably practicable after the registrar makes an order disposing of an administrative matter under section 109 of the Act, the registrar must deliver written notice of the order to the respondent, accompanied by

(a) the items required by section 110(1) of the Act, and

(b) any other information or records that, in the opinion of the registrar, the respondent would reasonably require to exercise their right to apply for a review under sections 110(2) and 381 of the Act and section 12-4.

Review of disciplinary order

12-4 (1) A respondent may apply under section 110(2) of the Act for a review of a disciplinary order under section 109(1)(b), (c) or (d) of the Act, within 30 days of their receipt of written notice of the order under section 110(1) of the Act, by providing a completed request for review in the specified form accompanied by any applicable review fee specified in Schedule G.

(2) If a respondent applies for review of a disciplinary order under subsection (1),

(a) the registrar must provide the request for review to the investigation committee, and

(b) the investigation committee must

(i) conduct a review on the record under section 382(1) of the Act, and

(ii) give the respondent an opportunity to be heard by inviting them to provide written submissions under section 380(2)(a) of the Act.

(3) After completing the review, the investigation committee must deliver written notice of its decision and reasons to the respondent as soon as reasonably practicable.

Division 2 – Monitoring Regulatory Compliance

Monitoring regulatory compliance

12-5 (1) The registrar may administer a compliance program of the college.

(2) The compliance program under subsection (1) may implement activities to monitor licensees for contraventions of the Act, the regulations and the bylaws, including ethics standards and practice standards, in accordance with section 118(a) of the Act.

(3) Without limitation, the compliance program's activities may include any of the following:

(a) recommending materials for college publication, including materials to educate licensees about their professional obligations and applicable limits and conditions on their practice under the Act, the regulations and the bylaws, including ethics standards and practice standards;

(b) collaborating with other colleges, government agencies, public bodies, professional associations or other organizations to share information and coordinate efforts to monitor licensees for contraventions;

(c) periodically and selectively monitoring online platforms, social media, websites or other publicly accessible media or resources to identify potential contraventions by selected licensees or licensees generally;

(d) periodically requiring some or all licensees to provide self-assessment reports to confirm their continuing awareness of and compliance with the requirements of the Act, the regulations and the bylaws, including ethics standards and practice standards;

(e) determining criteria for the selection of licensees for compliance audits of aspects of their practices;

(f) determining criteria for deferring or exempting selected licensees from compliance audits;

(g) determining the scope of, and performing, compliance audits;

(h) appointing one or more employees of the college, contractors, or subject matter experts as assessors to conduct or participate in compliance audits;

(i) seeking information from any source to determine if a licensee may have been practising in contravention of requirements of the Act, the regulations or the bylaws, including ethics standards and practice standards;

(j) identifying and notifying licenses of potential contraventions, and giving them an opportunity to respond;

(k) reporting conclusions to the registrar regarding a licensee's compliance or potential contraventions.

(4) If a potential contravention by a licensee is reported to the registrar under subsection (3)(k), the registrar may

(a) refer the matter to the college's quality assurance program, or

(b) initiate a regulatory complaint under section 119 of the Act.

(5) A licensee who is subject to a compliance audit must participate in, and cooperate with, the compliance audit process.

(6) For the purposes of subsection (5), requirements for a licensee's participation in and cooperation with the compliance audit process may include, but are not limited to, any of the following:

(a) completing and submitting a compliance audit questionnaire;

(b) responding to requests and answering all questions in a prompt and complete manner;

(c) providing access to all requested information, files and records in the licensee's possession or control, including but not limited to information, files or records relevant to the licensee's compliance with applicable requirements of the Act, the regulations or the bylaws, including ethics standards and practice standards;

(d) attending one or more interviews with an assessor, either in person or by electronic means as directed by the assessor, which interviews may be recorded by the assessor by audio or video;

(e) facilitating office and site visits, in person or by electronic means, by the assessor or any person designated by the assessor, including taking reasonable steps to arrange for office and site access.

(7) An assessor or the registrar may specify time periods for licensees to comply with requirements of the compliance audit process.

Division 3 – Complaints, Reports and Initiating Investigations

Requirements for regulatory report

12-6 (1) A regulatory report under Division 6 of Part 3 of the Act must be in writing and given to the registrar.

(2) A regulatory report must include the following:

(a) the reporter's name and contact information;

(b) if the reporter is reporting on behalf of another person, public body or organization, the name of that person, public body or organization;

(c) the respondent's name, if available, or information by which the college may identify the respondent;

(d) the specific allegations against the respondent;

(e) copies of documents relevant to the allegations, where feasible.

Requirements for regulatory complaint by registrar

12-7 A regulatory complaint by the registrar under section 119 of the Act must be in writing, and must include the following:

(a) the respondent's name, if available, or information by which the college may identify the respondent;

(b) the allegations against the respondent.

Requirements for regulatory complaint by others

12-8 (1) A regulatory complaint under section 120 of the Act must be in writing and given to the registrar.

(2) A regulatory complaint under section 120 of the Act must include the following:

(a) the complainant's name and contact information;

(b) the respondent's name, if available, or information by which the college may identify the respondent;

(c) the specific allegations against the respondent;

(d) copies of documents relevant to the allegations, where feasible.

(3) If the complainant is not the person who experienced the respondent's alleged conduct or the recipient of health care services provided by the respondent that are the subject of their regulatory complaint, the complainant must provide

(a) the name and contact information for the person who experienced the alleged conduct or received the applicable health care services, and

(b) evidence satisfactory to the registrar that the complainant is acting with the consent of or with legal authority to make the regulatory complaint on behalf of the person described in paragraph (a).

(4) The registrar may vary the procedures for submitting regulatory complaints under section 120 of the Act to accommodate a complainant's individual circumstances.

(5) If an employee of the college assists a complainant to record a regulatory complaint or particulars of a regulatory complaint in written form under subsection (4), the registrar must deliver a copy of the written regulatory complaint to the complainant, and the complainant may provide clarification to the registrar of the intent of their complaint within a reasonable period of time specified by the registrar.

(6) If a regulatory complaint is stated to be filed on behalf of another person or organization, the college may act to satisfy itself that the complainant has authority to act on behalf of the specified person or organization.

(7) If a regulatory complaint is filed by or on behalf of a licensee's employer, the employer is deemed to be the complainant in the matter, and any individual duly authorized by the employer may act on behalf of the employer in respect of the matter.

Preliminary investigation and disposition by registrar

12-9 (1) Before referring a regulatory complaint to the investigation committee, the registrar may conduct, or may direct an investigator to conduct, such preliminary or initial

investigation as the registrar may consider relevant or necessary for any of the following purposes:

(a) to assist in clarifying the complaint or the allegations contained in it;

(b) to consider whether the complainant's consent should be sought to transfer the regulatory complainant to another regulator under section 122(4) of the Act;

(c) to consider whether direction should be sought from the investigation committee under section 122(1) of the Act to make a summary protection order;

(d) to enable the exercise of the registrar's discretion to dispose of the complaint under section 122(3) of the Act, including the possible issuance of

(i) an order disposing of all or part of the complaint under section 158(2) of the Act, or

(ii) subject to section 258(2)(c)(ii) of the Act, a summary dismissal order under section 258 of the Act;

(e) to enable the registrar to complete a written assessment of the complaint under section 123(1)(b) of the Act and make any recommendations to the investigation committee under section 123(1)(c) of the Act.

(2) For greater certainty, for the purpose of preliminary or initial investigation of a regulatory complaint under subsection (1), the registrar may do any of the following:

(a) subject to section 12-10(3), deliver to the respondent

(i) a copy of the complaint or a summary of it, and

(ii) some or all of the information and records obtained with respect to the complaint,

to give the respondent an opportunity to provide information, records or written submissions that the respondent believes should be considered for any purpose described in subsection (1)(b) to (e);

(b) request or obtain additional information or records from the complainant, the respondent or another source;

(c) make an order under section 121(2) of the Act;

(d) exercise other investigative powers of an investigator under section 131 of the Act, in accordance with section 363(3) of the Act.

(3) If the registrar makes an order disposing of a regulatory complaint under section 122(3) of the Act without referring the complaint to the investigation committee, the registrar must, within 30 days of making the order, give the investigation committee the following in accordance with section 123(2) of the Act:

(a) a summary of the complaint and of the information and records received or obtained with respect to it;

(b) a copy of the order with reasons.

Notice to respondent and respondent's opportunity to comment

12-10 (1) Subject to subsection (3), if the registrar refers a regulatory complaint to the investigation committee under section 123(1) of the Act and the investigation committee does not direct the registrar to make an order disposing of the complaint without further investigation under section 12-15, a suspension order, or a termination order, the registrar

(a) must deliver a copy of the regulatory complaint or a summary of it to the respondent as soon as reasonably practicable, if they have not already done so under section 12-9(2)(a),

(b) may deliver to the respondent some or all of the information and records obtained with respect to the complaint, and

(c) must invite the respondent to provide any information, records or written submissions in response to the complaint that the respondent believes should be considered by the investigation committee.

(2) Subject to subsection (3), after receiving notice under section 124(2) of the Act of an investigation initiated by the investigation committee without a regulatory complaint, the registrar

(a) must deliver to the respondent the written notice required by section 124(3) of the Act, including the reasons for the investigation, as soon as reasonably practicable,

(b) may deliver to the respondent some or all of the information and records obtained with respect to the investigation, and

(c) must invite the respondent to provide any information, records or written submissions in response to the reasons for the investigation that the respondent believes should be considered by the investigation committee.

(3) The registrar may withhold or postpone notifying a respondent about a regulatory complaint or investigation, providing any related information or records to the respondent, or inviting the respondent to respond to the complaint or the reasons for the investigation, at any time before the investigation is complete if the registrar has reasonable grounds to believe that doing so would risk

(a) harm to any person, including harm to the continuing provision of health care services to any person, or

(b) a material loss of evidence.

Division 4 – Identity Protection

Application for reconsideration of notice of intent or termination order

12-11 A person described in section 240(1) of the Act may apply under section 240(5) of the Act for reconsideration of a notice of intent to take an action under section 240(1)(b) or a termination order, within 30 days of their receipt of that notice or order, by providing a completed request for reconsideration in the specified form accompanied by any applicable reconsideration fee specified in Schedule G.

Division 5 – Investigations of Fitness and Misconduct

Control of investigations

12-12 In addition to the powers in section 127 of the Act, the investigation committee may

(a) establish and prioritize investigative goals, including

(i) to protect the public from harm and discrimination, and give effect to other guiding principles under section 14 of the Act,

(ii) to hold licensees accountable for breaching or contravening duties under the Act and maintain public confidence in the professions governed by the college, and

(iii) to allocate limited investigative resources in the public interest, and

(b) prioritize investigation matters in accordance with investigative goals.

Competence assessments

12-13 (1) An investigator must notify the registrar of an intention to order a competence assessment under section 132(1) of the Act.

(2) An investigator may order a competence assessment to evaluate one or more of the following:

(a) the respondent's clinical performance of the designated health profession;

(b) the respondent's knowledge and understanding of the regulatory requirements applicable to the practice of the designated health profession, including practice standards, ethical standards, and anti-discrimination measures;

(c) any other aspect of the respondent's practice which will assist in assessing whether the respondent is competent to practise the designated health profession.

Exclusion of unrelated information or records

12-14 (1) If an investigator or the registrar receives information or a record in the course of an investigation, including any preliminary or initial investigation under section 12-9, that the investigator or registrar determines not to be related or relevant to the regulatory complaint or the reasons for investigation, the investigator or registrar may omit or remove the information or record from the college's records on the matter.

(2) If an investigator or the registrar receives information or a record in the course of an investigation, including any preliminary or initial investigation under section 12-9, that the investigator or registrar has reasonable grounds to believe was obtained by a party to litigation or other proceedings of a judicial nature, and that it may have been disclosed to the college by that party in breach of an express or implied undertaking of confidentiality, the investigator or registrar

(a) must omit or remove the information or record from the college's records on the matter, and

(b) must not make any other use of the information or record unless authorized by a court order.

Disposition by investigation committee without further investigation

12-15 (1) Subject to subsection (3), if the investigation committee determines, upon review of a regulatory complaint referred to the committee under section 123(1) of the Act and after considering

(a) the information and records provided by the registrar under section 123(1)(a) of the Act, including the respondent's disciplinary record and any capacity summary,

(b) the registrar's assessment of the complaint under section 123(1)(b) of the Act, and

(c) any recommendations provided by the registrar under section 123(1)(c) of the Act,

that there are no reasonable grounds to believe that the respondent lacks competence or has committed an act of misconduct, and if the respondent is not subject to a continuing practice order or revocation order, the committee may direct the registrar to make an order dismissing the complaint under section 136(3) of the Act without further investigation.

(2) Subject to subsection (3) and section 12-17, if the investigation committee determines, upon review of a regulatory complaint referred to the committee under section 123(1) of the Act and after considering the items described in subsection (1)(a) to (c), that there are reasonable grounds to believe that the respondent lacks competence or has committed an act of misconduct, the committee may direct the registrar to dispose of the complaint without further investigation by making an order described in 136(2)(a) of the Act.

(3) The investigation committee may act under subsection (1) or (2) only if the investigation committee is satisfied that any preliminary or initial investigation already completed by or at the direction of the registrar under section 12-9 is adequate to dispose of the regulatory complaint.

(4) For greater certainty, if a regulatory complaint is disposed of at the direction of the investigation committee under subsection (1) or (2),

(a) the registrar's assessment and any recommendations provided by the registrar under section 123(1)(b) and (c) of the Act are deemed to constitute the final report respecting the investigation of the complaint, and

(b) neither the registrar nor an investigator is required to provide a further report to the investigation committee under section 134(1) of the Act.

Investigation reports

12-16 Except as provided in section 12-15, before issuing a final investigation report under section 134(1) of the Act, an investigator

(a) must provide a draft of the report to the respondent, and invite them to provide any additional information, records or written submissions that they believe should be

considered in response to the draft report within a reasonable period of time specified by the investigator,

(b) may request any additional information, records or response from the complainant, the respondent or another source that the investigator may consider relevant after reviewing any information, records or written submissions provided by the respondent under paragraph (a), and

(c) may update the draft report as the investigator may consider necessary or appropriate after reviewing and considering all items received under paragraphs (a) and (b).

Orders for specified education, training or other remedial activities

12-17 Before the investigation committee directs the registrar to dispose of a regulatory complaint or investigation under section 159(2)(b) of the Act by making an order without the respondent's consent described in section 269(d)(iii) of the Act, requiring the respondent to undertake specified education, training or other remedial activities, the investigation committee must direct the registrar

(a) to provide written notice of the proposed order to the respondent, and

(b) to give the respondent an opportunity to provide written submissions to the investigation committee regarding the proposed order.

Respondent's failure to comply with restorative process

12-18 If the investigation committee takes action to dispose of a regulatory complaint or investigation under section 136(2)(a) of the Act by directing the registrar to make an order under section 157 of the Act requiring the respondent to engage in one or more restorative processes described in section 268(1) of the Act but later has reasonable grounds to conclude that the respondent failed to comply in good faith with the order, the investigation committee may direct the registrar

(a) to make one or more further orders under section 136(2)(a) of the Act, or

(b) to make a request under section 136(2)(b) of the Act for the director of discipline to issue a citation.

Respondent's failure to consent to disposition

12-19 If the investigation committee takes action to dispose of a regulatory complaint or investigation under section 136(2)(a) of the Act by directing the registrar to make an order under section 157 or 158 of the Act but the respondent fails to consent in whole or in part to the order, the investigation committee may direct the registrar

(a) to make one or more further orders under section 136(2)(a) of the Act, or

(b) to make a request under section 136(2)(b) of the Act for the director of discipline to issue a citation.

Investigation expenses

12-20 Subject to any maximum prescribed amount and section 273(3) of the Act, an order for investigation expenses must be determined in accordance with Schedule E.

Division 6 – Capacity Evaluations

Registrar

12-21 Subject to section 363(3) of the Act, the registrar is authorized to exercise the powers and perform the duties of a capacity officer.

Notice to the respondent

12-22 If the investigation committee directs a capacity evaluation, the registrar must deliver a written order for the capacity evaluation to the respondent as soon as reasonably practicable.

Report to capacity officer if respondent fails to cooperate

12-23 (1) A licensee, including a licensee of another regulatory college, who conducts an assessment for the purposes of a capacity evaluation must submit a written report to the capacity officer identified by the registrar if the respondent fails to cooperate with the assessment or any part of it.

(2) For the purposes of subsection (1), a written report must include

(a) a summary and chronology of all requests made to the respondent to participate in or cooperate with the assessment or any part of it,

(b) the respondent's responses, if any, to the requests described in paragraph (a), and

(c) copies of any relevant records relating to the requests and any responses described in paragraphs (a) and (b).

Capacity officer's report to registrar

12-24 (1) If a capacity officer gives written notice to the registrar under section 142(1) of the Act that a respondent is interfering with the conduct of a capacity evaluation, the notice must outline the basis for the capacity officer's opinion that the respondent

(a) has not cooperated with the capacity evaluation,

(b) has lied or given false information to, or is refusing to comply with a direction given by, a licensee who is conducting an assessment, or

(c) has otherwise done, or omitted to do, something that has impeded the conduct or completion of the capacity evaluation.

(2) The written notice to the registrar must include copies of any relevant records relating to the requests to, and responses, from the respondent.

Capacity officer's notice to the investigation committee of risk to public

12-25 If a capacity officer gives written notice to the investigation committee under section 143(1) of the Act of their opinion that a respondent presents a risk to the public, the notice must

(a) outline the basis for the capacity officer's opinion, and

(b) include copies of any relevant records supporting that opinion.

Licensee's assessment report

12-26 (1) A licensee, including a licensee of another regulatory college, who conducts an assessment for the purposes of a capacity evaluation must submit a written assessment report to the capacity officer identified by the registrar as soon as reasonably practicable after completing the assessment.

(2) For the purposes of subsection (1), unless otherwise directed by the capacity officer, a written assessment report should ordinarily include the following:

(a) a summary of the concerns that formed the basis for the assessment;

(b) a description of the respondent's practice context and the context in which the concerns arose;

(c) a description of the assessment process;

(d) a summary of any information obtained from interviews or other sources;

(e) the licensee's professional opinion regarding whether the respondent's capacity is impaired by a health condition and, if so, whether the nature or extent of the impairment may present a current or imminent significant risk of harm, and any recommendations to mitigate that risk;

(f) any recommendations the licensee may have for any of the following:

(i) treatment, education, reassessments, interventions such as training, coaching or mentoring, or other steps to restore or ensure the respondent's continued capacity;

(ii) ongoing monitoring to ensure the respondent's continued capacity;

(iii) limits or conditions on the respondent's licence to ensure public safety;

(iv) what should be required to end monitoring.

Capacity officer's notice to respondent

12-27 (1) After reviewing all assessment reports and the respondent's disciplinary record and capacity record, if any, the capacity officer must give written notice to the respondent of the outcome of the evaluation under section 145(1) of the Act, with reasons, as soon as reasonably practicable.

(2) If the capacity officer has reasonable grounds to believe that the respondent lacks capacity, the written notice must include the following:

(a) a summary of the professional opinions and recommendations contained in the assessment reports;

(b) the reasons for considering making a continuing practice order or a revocation order, if applicable;

(c) the timeframe in which the respondent may provide additional information or records or request changes to the order being considered;

(d) a statement that the continuing practice order or revocation order being considered, if applicable, may be made without further notice to the

respondent if the respondent does not provide additional information or records or request a change to the order within the specified timeframe.

Reconsideration of continuing practice order or revocation order

12-28 (1) A respondent who is subject to a revocation order may apply under section 148(1) of the Act for reconsideration by the capacity officer, within 30 days of their receipt of written notice of the order, by providing a completed request for reconsideration in the specified form accompanied by any applicable reconsideration fee specified in Schedule G.

(2) A respondent who is subject to a continuing practice order may apply under section 148(1) of the Act for reconsideration by the capacity officer

(a) within 30 days of their receipt of written notice of the order,

(b) in accordance with the directions of or a schedule set by the capacity officer, or

(c) as otherwise authorized by the capacity officer,

by providing a completed request for reconsideration in the specified form accompanied by any applicable reconsideration fee specified in Schedule G.

(3) If a respondent applies for a reconsideration under subsection (1) or (2), the capacity officer must

(a) conduct the reconsideration under section 382(1) of the Act, and

(b) give the respondent an opportunity to be heard by inviting them to provide written submissions under section 380(2)(a) of the Act.

(4) After completing the reconsideration, the capacity officer must deliver the reconsideration decision with reasons to the respondent as soon as reasonably practicable.

Division 7 – Summary Protection Orders

Summary protection orders

12-29 (1) When considering whether to direct the registrar to make a summary protection order under section 259(2)(a) of the Act on grounds that the respondent's practice may present a significant risk of harm, the investigation committee must consider all of the following:

(a) whether there is a *prima facie* case that the respondent lacks competence or has committed an act of misconduct, having regard to

(i) the facts alleged in a regulatory complaint, if admitted or proven, to the extent the complainant's allegations do not appear to be in conflict with objective or undisputed evidence, manifestly unreliable, or exaggerated, and

(ii) any other information obtained in an investigation;

(b) whether there is a significant and immediate risk of harm to the public, including a significant and immediate a risk of harm to any person, having regard to

(i) the nature and seriousness of the respondent's alleged lack of competence or act of misconduct,

(ii) any measures currently in place to protect the public,

(iii) the probability of harm, and

(iv) the nature and seriousness of the potential harm;

(c) whether the public interest requires immediate protection through a summary protection order and, if so, what measures are necessary to protect the public;

(d) how specific measures may impact the respondent, and the proportionality of such impacts to the risk of harm to the public.

(2) When considering whether to direct the registrar to make a summary protection order under section 259(2)(b) of the Act on grounds that the respondent is providing false or misleading information to patients or the public, the investigation committee may consider any scientific or other facts it has reasonable grounds to believe are reliable.

(3) Without limiting section 259(1) of the Act, the investigation committee may direct that one or more of the following limits or conditions on a respondent's practice be included in a summary protection order:

(a) a requirement for the respondent to practise under supervision or under the direction of a practising licensee approved by the college;

(b) a requirement that the respondent practice only in the presence of a chaperone approved by the college;

(c) a restriction on how the respondent practises their profession or engages in any aspect of practice, including but not limited to a condition requiring the respondent to disclose specified information to clients or to post specified signage before providing professional health services;

(d) a restriction limiting the classes of client to whom the respondent may provide professional health services;

(e) a restriction limiting the scope of professional health services the respondent may provide;

(f) a requirement to comply with periodic or random practice audits on terms specified by the college;

(g) such other limits or conditions that the committee considers necessary and appropriate to protect the public from a significant risk of harm.

(4) The registrar must deliver a copy of the summary protection order with reasons to the respondent as soon as reasonably practicable.

Reconsideration of summary protection order

12-30 (1) A respondent who is subject to a summary protection order may apply under section 261(1) of the Act for reconsideration by the investigation committee

(a) within 30 days of receipt of written notice of the order,

(b) in accordance with the directions of or a schedule set by the investigation committee, or

(c) as otherwise authorized by the investigation committee,

by providing a completed request for reconsideration in the specified form accompanied by any reconsideration fee specified in Schedule G.

(2) If a respondent applies for reconsideration of a summary protection order subsection (1), the investigation committee must

(a) conduct the reconsideration under section 382(1) of the Act, and

(b) give the respondent an opportunity to be heard by inviting them to provide written submissions under section 380(2)(a) of the Act.

(3) After the investigation committee completes the reconsideration, the registrar must deliver the committee's reconsideration decision with reasons to the respondent as soon as reasonably practicable.

Division 8 – Obligations of Suspended Licensees

Respondent's duties when practice authority suspended

12-31 (1) During any period of suspension of a licensee's practice authority, the licensee must

(a) not personally engage in the practice of the designated health profession in respect of which licensee's practice authority is suspended or hold themselves out as a licensee authorized to practise that designated health profession, except to the extent permitted expressly by an applicable order or made under the Act,

(b) elect either to suspend their practice during the suspension period, or to arrange for another licensee acceptable to the college to act as a *locum* and manage the licensee's practice during the suspension period,

(c) arrange for the transfer of clinical records in the licensee's custody and control to a licensee approved by the college, or make other arrangements for clients or clients' representatives to be able to obtain access to their clinical records in accordance with section 9-16,

(d) not hold office in the college as a board member, a member of a committee or advisory working group, an investigator, a capacity officer, a quality assurance assessor or a quality assurance officer, or in any other appointed capacity authorized to act on behalf of the college under the Act or bylaws,

(e) not make appointments for clients or prospective clients,

(f) not contact or communicate with clients or prospective clients, except for the purpose of

(i) advising a client or prospective client of the fact and duration of the suspension,

(ii) advising a client or prospective client that a locum or another licensee or appropriate health professional will continue to act or provide services in the suspended licensee's place, or

(iii) referring a client or prospective client to another licensee or appropriate health professional,

(g) remove the licensee's name and any sign relating to the licensee's practice of the designated health profession in respect of which the licensee's practice authority is suspended from any premises where the licensee practised that designated health profession, and any building in which any such premises are located,

(h) prominently display, if required by an disciplinary order, a notice of suspension in a form and in an area approved by the registrar, which states the duration and reasons for the suspension, and

(i) pay any fee required by the college when due in order to remain a licensee, and any other outstanding amount owed or owing to the college.

(2) No licensee or former licensee is entitled to any refund of any fee or other payment made to the college solely on the basis that it was paid during or in relation to a period of suspension.

(3) During the period of suspension, a suspended licensee may permit another licensee in good standing to practise the applicable designated health profession within premises where the licensee practised the designated health profession, provided that the suspended licensee complies with the provisions of subsection (1).

(4) A communication under subsection (1)(f)(i), (ii) or (iii) may be made in writing in a form approved in advance by the registrar, or by employing office staff, an answering service, or other method of telecommunication specifically for that purpose.

Division 9 – Citations for Discipline Hearing

Considerations for requesting or cancelling citation

12-32 (1) Without limiting the investigation committee's discretion under sections 136(2)(b) and 138(2)(b) of the Act, the committee may consider the following factors when determining whether to direct the registrar to request that the director of discipline issue or cancel a citation, or whether to agree to a disciplinary order that will result in a request to cancel a citation under section 139(1)(b) of the Act:

(a) the public interest in recommending or continuing to pursue a discipline hearing, having regard to

(i) the nature and seriousness of the respondent's alleged lack of competence or act of misconduct,

(ii) the need to protect the public from harm and discrimination, including actual or potential harm to a complainant or others,

(iii) the nature, extent, findings or outcomes of any related criminal, regulatory or other proceedings,

(iv) the respondent's disciplinary record and capacity summary, if any, and

(v) the availability, nature and adequacy of alternative means of disposing of the matter, with or without the respondent's consent, including steps taken or offered by a respondent to correct or address their alleged lack of competence or act of misconduct;

(b) whether there is a reasonable likelihood the college will discharge the burden of proof at a hearing, having regard to

(i) the willingness of the complainant and any other necessary witnesses to participate in a hearing,

(ii) a provisional assessment of the strength of the evidence available to the college based on information gathered during the investigation, including a provisional assessment of the credibility and reliability of potential witnesses,

(iii) the respondent's anticipated defences, and

(iv) the strengths and weaknesses of the college's case based on all the information available;

(c) any other factors relevant to the circumstances the director of discipline is required to consider before issuing a citation under section 162(1) of the Act or before cancelling a citation under section 167(1) of the Act.

(2) For greater certainty, the investigation committee may direct the registrar to request a citation based on the public interest in disposing of a matter with a discipline hearing despite a provisional assessment that the college may be unable to discharge the burden of proof.

(3) No provision in this section may be construed as waiving any legal advice privilege that applies to communications between a legal professional and the college, including the college's registrar, the investigation committee or anyone else acting on the college's behalf.

(4) The registrar is responsible for proposing the content of a citation in consultation with the investigation committee.

Division 10 – Enforcement of Disciplinary Orders

Enforcement of disciplinary orders

12-33 (1) The registrar is responsible for establishing a process for the enforcement of orders, including but not limited to enforcement of disciplinary orders made by a discipline panel.

(2) Without limiting the registrar's powers under section 197(2) of the Act or subsection (1), the registrar may

(a) recommend that the licence committee attach limits or conditions for the purpose of enforcing a disciplinary order when issuing, varying, renewing or reinstating a licence, if consistent with the terms of the disciplinary order, or

(b) publish on the college website, or make publicly accessible by other means, a public notice respecting a licensee's failure to comply with a disciplinary order.

Division 11 – Misconduct Involving Listed Substances

Health Canada notice requests

12-34 (1) In this section:

"conduct of an activity", with reference to a listed substance, includes

(a) use, possession, compounding, dispensing, administration or prescription of the listed substance, and

(b) issuance of an order under section 6 of the RHPR to compound, dispense or administer the listed substance;

"consent to retraction" means, in respect of a notice, a letter under section 80(b)(ii) of the *Benzodiazepines and Other Targeted Substances Regulations* (Canada), section G.04.004.3(b)(ii) of the *Food and Drug Regulations* (Canada) or section 60(b)(ii) of the *Narcotic Control Regulations* (Canada) signifying the college's consent to retraction of the notice;

"Federal Minister" means the Minister of Health of Canada, and includes an agent authorized to act on behalf of that Minister;

"listed substance" means a "listed substance" as defined in section 1 of the *New Classes of Practitioners Regulations* (Canada);

"midwife" means a current or former midwife licensee, and includes a person who was previously registered as the equivalent of any class of midwife licensee under the former Act;

"notice" means a notice under section 79(1) of the *Benzodiazepines and Other Targeted Substances Regulations* (Canada), section G.04.004.2(1) of the *Food*

and Drug Regulations (Canada) or section 59(1) of the *Narcotic Control Regulations* (Canada);

"nurse practitioner" means a current or former NP licensee, and includes a person who was previously registered as the equivalent of any class of NP licensee under the former Act;

"relevant standard" means a prohibition, requirement, limit or condition established under the ethics standard or practice standards of the college, or otherwise imposed under the Act, that is relevant to a nurse practitioner's or midwife's conduct of an activity with a listed substance.

(2) If

(a) a nurse practitioner or midwife admits to a failure to comply with a relevant standard, or

(b) a discipline panel decides under section 191(1) of the Act that a nurse practitioner or midwife has committed an act of misconduct involving failure to comply with a relevant standard,

the investigation committee may direct the registrar to deliver a written request to the Federal Minister for issuance of a notice in respect of the nurse practitioner or midwife.

(3) The investigation committee may authorize the registrar to provide a consent to retraction of a notice if

(a) the investigation committee is satisfied that the consent to retraction is not contrary to the public interest, and

(b) the consent to retraction is not inconsistent with any other limits or conditions imposed on the nurse practitioner's or midwife's practice under the Act.

(4) The registrar must not issue a consent to retraction except in accordance with subsection (3).

Division 12 – Unauthorized Practice and Title Use

Definition

12-35 In this Division:

"unauthorized practice" means conduct contravening section 29 of the Act;

"unauthorized use of title" means conduct contravening section 30 of the Act.

Unauthorized practice and title use monitoring program

12-36 (1) The registrar may administer an unauthorized practice and title use monitoring program of the college.

(2) The monitoring program under subsection (1) must monitor for and receive reports relating to

(a) the unauthorized practice of restricted activities or aspects of practice of the designated health professions for which the college is responsible, and

(b) the unauthorized use of titles reserved for the use of classes of licensees of the college.

(3) Without limitation, the activities of the monitoring program under subsection (1) may include any of the following:

(a) recommending materials for college publication, including materials to educate the public on risks arising from unauthorized practice, the purposes of exclusive titles, and how members of the public may report unauthorized practice or an unauthorized use of title to the college;

(b) collaborating with other colleges, government agencies, public bodies, professional associations or other organizations to share information and coordinate efforts to identify unauthorized practice or unauthorized uses of title;

(c) periodically and selectively monitoring online platforms, social media, websites or other publicly accessible media or resources to identify individuals or other entities who may be engaging in unauthorized practice or an unauthorized use of title;

(d) periodically and selectively monitoring former licensees to ensure they are not engaged in unauthorized practice or an unauthorized use of title,

(e) investigating any matter relating to unauthorized practice or an unauthorized use of a title reported to, or found by, the monitoring program;

(f) such other activities that the registrar may direct or authorize.

(4) For the purposes of an investigation under subsection (3)(e), the registrar may request a direction from the investigation committee, in accordance with section 374(1)(a) of the Act, to appoint one or more investigators under section 126(1)(a) of the Act to conduct or assist with the conduct of the investigation.

(5) The college must keep the identity of individuals who report to the monitoring program confidential unless disclosure is necessary for the college to exercise a power or perform a duty.

Public notice of unauthorized practice or title use

12-37 (1) Without limiting the registrar's powers under section 377 of the Act, if the registrar concludes after investigation that a person has engaged or is engaging in unauthorized practice or an unauthorized use of title, the registrar may, subject to subsection (2), publish on the college website, or make publicly accessible by other means, a public notice respecting the person's unauthorized practice or unauthorized use of title.

(2) If the college has or is reasonably able to obtain contact information for a person described in subsection (1), the registrar must, before publishing a public notice respecting that person under subsection (1),

(a) provide written notice to the person of the proposed public notice, and

(b) give the person an opportunity to provide written submissions regarding the proposed public notice.

PART 13 - SUPPORT PROGRAMS

Support programs

13-1 (1) Subject to subsection (2), the registrar must establish and administer the following support programs on behalf of the college:

(a) an information services program;

(b) a support services program;

(c) a support worker program.

(2) In lieu of, or in addition to, the establishment and administration of a support program by the registrar under subsection (1), the registrar may direct the college to participate in one or more support programs that are established or administered by other regulatory colleges, or established or co-administered jointly by the college and one or more other regulatory colleges.

(3) A provision of this Part that relates to a specific type of support program applies only to the extent the college has established or is participating in that type of support program.

(4) The registrar may establish policies and procedures consistent with the Act, the regulations and the bylaws

(a) for the establishment and administration of support programs, and

(b) for the participation in support programs established or administered by other regulatory colleges, or established or co-administered jointly by the college and one or more other regulatory colleges.

(5) Without limiting subsection (4), policies and procedures established under that subsection may address

(a) any inconsistencies between program parameters established under this Part and program parameters established under the bylaws of another regulatory college or under a shared funding agreement in respect of a support program described in subsection (2), and

(b) other matters described in section 277(1) of the Act.

Shared funding agreements

13-2 The registrar is authorized to enter into shared funding agreements for the purposes of funding or administering support programs, in whole or in part, in collaboration with

(a) one or more other regulatory colleges, or

(b) the minister and one or more other regulatory colleges.

Appointment of administrators

13-3 The registrar must

(a) appoint an administrator for each support program administered by the college, and

(b) consent to the appointment of an administrator for each support program co-administered with one or more other regulatory colleges.

Administrator may exercise power of support officer

13-4 An administrator may exercise the power of a support officer for the purposes of determining a person's eligibility to receive information services under section 282 of the Act in accordance with any applicable limits or conditions imposed under the program parameters.

Application for support

13-5 (1) A person may request support by submitting a support application in the form required by an administrator together with the supporting information and records required under the applicable program parameters.

(2) A person who submits a support application on behalf of another person must provide proof, satisfactory to an administrator, of authorization to act on the behalf of the proposed recipient.

(3) As soon as reasonably practicable after receiving a completed application for information services, an administrator must provide written notice to the applicant and, if applicable, the other proposed recipient under subsection (2), of their eligibility under 13-13(1) to receive information services, unless section 13-13(3) applies.

(4) As soon as reasonably practicable after receiving a completed application for support services or the assistance of a support worker, an administrator must give the support application and supporting information and records to a support officer to determine the eligibility of the applicant or other proposed recipient under subsection (2) to receive support, unless the administrator transfers the support application to another administrator in accordance with section 280(2) of the Act.

Support officer's eligibility decision

13-6 (1) A support officer must determine

(a) whether an applicant or other proposed recipient is eligible for support services or the assistance of a support worker, or both, in accordance with the eligibility requirements set out in section 283 of the Act, and

(b) if so, the form of support and any limits or conditions on that support.

(2) A support officer who makes a decision under subsection (1) about a person's eligibility for support must, as soon as reasonably practicable, provide their decision, with reasons, to

(a) the administrator,

(b) the applicant, and

(c) if applicable, the other proposed recipient of support.

Reconsideration of adverse eligibility decision

13-7 (1) An applicant or other proposed recipient of support who receives an adverse eligibility decision under section 13-6(2) may apply for reconsideration of that decision, within 30 days of their receipt of the decision, by providing a completed request for reconsideration to the registrar in the required form.

(2) The registrar must provide a request for reconsideration under subsection (1) to the support officer who made the adverse eligibility decision.

(3) Upon receipt of a request for reconsideration, the support officer must provide the applicant or other proposed recipient of support with an opportunity to be heard by inviting them to provide written submissions under section 380(2)(a) of the Act.

(4) After completing a reconsideration under subsection (3), the support officer must, as soon as reasonably practicable, deliver their reconsideration decision with reasons to

(a) the administrator,

(b) the applicant, and

(c) if applicable, the other proposed recipient of support.

Administrator's support determination

13-8 (1) If a person is eligible to receive information services under section 13-13, the administrator must determine the following:

(a) the scope of information services to be provided in accordance with section 285(2) of the Act;

(b) the duration of information services to be provided;

(c) any other matters required under the program parameters;

(d) any other matters that are appropriate in the opinion of the administrator.

(2) If a support officer determines that a person is eligible for support services, the administrator must, in addition to considering the matters required by section 286 of the Act, determine any other matters required under the program parameters.

(3) If a support officer determines that a person is eligible to receive the assistance of a support worker, the administrator must, in addition to considering the matters required by section 287 of the Act, determine any other the matters required under the program parameters.

(4) An administrator must, as soon as reasonably practicable, provide written notice of a support determination under subsection (1), (2) or (3) to

(a) the person eligible to receive support and, if applicable, the person who applied for support on their behalf, and

(b) if applicable, the support officer who made the eligibility decision.

(5) An administrator may defer making a support determination under this section pending the outcome of an application for reconsideration of an eligibility decision.

Reconsideration of support determination

13-9 (1) A person who is eligible to receive support or, if applicable, the person who applied for support on their behalf, may apply for reconsideration of a support determination made by the administrator under section 13-8, within 30 days of their receipt of the decision, by providing a completed request for reconsideration to the registrar in the required form.

(2) The registrar must provide a request for reconsideration under subsection (1) to the administrator who made the support determination.

(3) Upon receipt of a request for reconsideration, the administrator must provide the applicant with an opportunity to be heard by inviting them to provide written submissions under section 380(2)(a) of the Act.

(4) After completing a reconsideration under subsection (3), the administrator must deliver their reconsideration decision, with reasons, as soon as reasonably practicable, to

(a) the person eligible to receive support and, if applicable, the person who applied for support on their behalf, and

(b) if applicable, the support officer who made the eligibility decision.

Application to change support determination

13-10 A recipient of support may apply under section 297 of the Act to change a support determination made by the administrator by providing a completed application to the administrator in the required form at any time during the period in which the recipient is eligible to receive support.

Appointment of support workers

13-11 (1) The board must establish a *Support Workers Policy* to outline the qualifications for support workers and to establish processes for assigning or reassigning them or for suspending or terminating their assignment.

(2) When assigning a support worker to a recipient, an administrator must ensure that the support worker's education, training, experience and other qualifications meet the individual needs identified by the recipient.

(3) Support workers are entitled to receive reimbursement for reasonable expenses necessarily incurred in assisting recipients with support services in accordance with the tariff set out in Schedule F.

Additional powers and duty to ensure compliance with program parameters

13-12 (1) An administrator or support officer may request any information or records relevant to their exercise of a power or performance of a duty, including decisions relating

to eligibility for support, provision of support, and changes to a support determination.

(2) An administrator or support officer must take reasonable steps to ensure that any person providing support services or providing assistance as a support worker complies with applicable program parameters.

(3) Without limiting section 13-1(4), the registrar may establish policies and procedures consistent with the Act, the regulations and the bylaws

(a) establishing processes for designating support officers,

(b) authorizing the funding of support services that are in addition to counselling services,

(c) establishing terms, prohibitions, requirements, limits or conditions relating to the provision of support, and

(d) authorizing an administrator to establish further policies or procedures relating to their program or programs.

Information services program parameters

13-13 (1) Subject to subsection (3), all individuals who inquire to the college about support programs under this Part are eligible to receive information services.

(2) For the purpose of section 285(3) of the Act, the administrator may authorize any person to provide information services who, in the administrator's opinion, has sufficient knowledge to address an inquiry.

(3) Information services may be withdrawn, declined, limited or suspended if the administrator or a support worker is reasonably satisfied that the recipient's inquiries or use of services are frivolous, vexatious, abusive or superfluous.

Selecting a service provider for support services

13-14 A recipient who is eligible to receive funding for support services may select one or more of the following as service providers:

(a) a regulated health practitioner accepted by the administrator as qualified to provide support services;

(b) an unregulated counselling professional accepted by the administrator as qualified to provide support services;

(c) a person or organization accepted by the administrator as qualified to provide trauma-informed care, or culturally relevant trauma support, including, if appliable, trauma support relevant to the recipient's Indigenous status or identity;

(d) another service provider authorized by the program parameters.

Information to support funding for support services

13-15 At any time before or after providing funding for support services under section 13-14, the administrator may require the recipient to provide, or cause to be provided, any or all of the following in a form satisfactory to the administrator:

(a) if the service provider is a regulated health practitioner,

(i) confirmation that they hold current licensure in good standing with their regulatory college, or any credential, permit, registration or authorization required to practise their designated health occupation, as the case may be, and

(ii) information concerning their regulatory or discipline history;

(b) a criminal record check authorization from the service provider;

(c) confirmation of the service provider's identity, education, training, experience and other relevant qualifications;

(d) written statements from the service provider and the recipient of support services confirming

(i) that there is no disqualifying relationship between them as described in section 292(1) of the Act, and

(ii) that the funds received from the college will only be used, or have only been used, to reimburse the provision of support services to the recipient;

(e) a description from the service provider of the dates, duration and nature of the support services to be provided, or that have been provided, to the recipient;

(f) any additional information required under the program parameters.

Support services program parameters

13-16 (1) An application for support services may only be made

(a) in conjunction with or after the submission to the registrar of a regulatory complaint that relates to the conduct with respect to which support services are being sought, and

(b) unless otherwise extended by the administrator, not later than six months after the date the regulatory complaint referred to in paragraph (a), or its subject matter, has resulted in

(i) a disposition by the registrar or the investigation committee, including the issuance of a disciplinary order, if no citation has been issued, or

(ii) the issuance of a citation.

(2) A support officer may consider the following factors when determining a person's eligibility to receive support services:

(a) any failure by the person to provide, or cause to be provided, requested information or records, without adequate reason;

(b) any misrepresentations by the person;

(c) other factors specified in the program parameters or in any applicable policy or procedure established under this Part.

(3) The administrator may withdraw, decline, limit or suspend a person's eligibility to receive support services

(a) in accordance with a determination respecting support services under section 286 of the Act,

(b) in accordance with the program parameters,

(c) if the administrator is reasonably satisfied that the person obtained support services through or as a result of an omission, misrepresentation or fraud, or

(d) if a service provider recommends that support services are not necessary, are no longer necessary, or should be withdrawn, limited or suspended for cause.

(4) The provision of support services is subject to the following terms, prohibitions, requirements, limits and conditions, unless otherwise directed by the administrator:

(a) a recipient must promptly advise the administrator if they become eligible to have all or part of the expenses relating to a support service paid or recovered under a program of insurance, an agreement, an arbitral award, or a court or tribunal order or award;

(b) funding for support services will be suspended, reduced or withdrawn to the extent the recipient becomes eligible for alternate funding as described in paragraph (a);

(c) the recipient's funding for support services must not exceed $10,000, and is further subject to the aggregate maximum funding amount available to the recipient under section 13-18;

(d) funding for seeking redress for sexual misconduct, sexual abuse or discrimination is limited to redress that is available under the Act, and does not include seeking redress through a court or a tribunal governed under another enactment;

(e) funding is not available for the following services or expenses:

(i) travel;

(ii) medication, vitamins or supplements;

(iii) fees or other expenses relating to the preparation of a report;

(f) funding for support services will terminate two years from the date the determination of eligibility for support services was made, unless

(i) the underlying regulatory complaint or its subject matter has not yet resulted in an outcomes described in subsection (1)(b),

(ii) the maximum amount of funding has not been expended, and

(iii) the administrator determines that it is appropriate to extend the period of funding;

(g) any additional terms, prohibitions, requirements, limits or conditions set out in any applicable program parameters or any applicable policy or procedure established under this Part.

(5) The registrar must establish a policy or procedure setting out the process and criteria for considering a funding extension request under subsection (4)(f)(iii).

Support worker program parameters

13-17 (1) An application for assistance by a support worker may only be made

(a) in conjunction with or after the submission to the registrar of a regulatory complaint that relates to the conduct with respect to which the assistance of a support worker is being sought, and

(b) unless otherwise extended by the administrator, not later than six months after the date the regulatory complaint referred to in paragraph (a), or its subject matter, has resulted in

(i) a disposition by the registrar or the investigation committee, including the issuance of a disciplinary order, if no citation has been issued, or

(ii) the conclusion of a discipline hearing.

(2) A support office may consider the following factors when determining a person's eligibility of a person to receive the assistance of a support worker:

(a) any failure by the person to provide, or cause to be provided, requested information or records, without adequate reason;

(b) any misrepresentations by the person;

(c) other factors specified in the program parameters or in any applicable policy or procedure established under this Part.

(3) In addition to the grounds set out in section 299 of the Act, the administrator may withdraw, decline, limit or suspend a person's eligibility to receive the assistance of a support worker

(a) in accordance with the program parameters,

(b) if the administrator is reasonably satisfied that the person obtained assistance through or as a result of an omission, misrepresentation or fraud, or

(c) if a support worker recommends that the assistance of a support worker is not necessary, is no longer necessary, or should be withdrawn, limited or suspended for cause.

(4) The provision of assistance of a support worker is subject to the following terms, prohibitions, requirements, limits and conditions, unless otherwise directed by the administrator:

(a) the recipient must promptly advise the administrator if they become eligible to have all or part of the expenses relating to a support worker paid or

recovered under a program of insurance, an agreement, an arbitral award, or a court or tribunal order or award;

(b) funding for the assistance of a support worker will be suspended, reduced or withdrawn to the extent the recipient becomes eligible for alternate funding as described in paragraph (a);

(c) the recipient's funding for the assistance of a support worker must not exceed $10,000, and is further subject to the aggregate maximum funding amount available to the recipient under section 13-18;

(d) subject to subsection (5), the assistance of a support worker will terminate on the following date, as applicable:

(i) the date on which the regulatory complaint referred to in subsection (1)(a) is withdrawn or disposed of by a termination order;

(ii) if the regulatory complaint is dismissed, three months after

(A) the expiry of the deadline file an application with the Health Professions Review Board for a complaint disposition review, if no application is filed, or

(B) the date on which the Health Professions Review Board confirms the dismissal of the regulatory complaint, if an application for a complaint disposition review is filed;

(iii) if the regulatory complaint is disposed of by a disciplinary order, three months after

(A) the expiry of the deadline file an application with the Health Professions Review Board for a complaint disposition review, if no application is filed, or

(B) the date on which the Health Profession Review Board confirms or varies the disposition, if an application for a complaint disposition review is filed;

(iv) three months from the date on which a citation issued in relation to the regulatory complaint is dismissed or resolved by disciplinary order.

(5) Subsection (4)(d) does not prevent a support worker from making an oversight complaint under section 296(2)(b) or completing the oversight complaint process.

(6) Before making any recommendation or report under section 296(1) or (2) of the Act or disclosing protected information for those purposes, a support worker must obtain the written informed consent of the recipient of the support worker's services to do so.

Maximum aggregate funding

13-18 The maximum aggregate funding available to a recipient under all support programs is $10,000.

SCHEDULE A - BOARD AND COMMITTEE MEMBER REMUNERATION AND EXPENSES

(Sections 2-4 and 3-13)

Table A: Remuneration for board members, committee members and members of advisory working groups

Category	Details
Compensation Rate	$75 per hour for all Eligible Time.
Eligible Time	Meeting time (actual or scheduled), preparation, email meetings, and education sessions or events with CEO/Registrar pre-approval.
Non-Eligible Time	Optional education; preparation time for education; duplicate compensation when salary replacement applies.
Salary Replacement	Employer invoices BCCNM at their employment hourly rate; individual cannot also claim hourly compensation that is covered by their employer; individual may claim compensation not covered by employer (e.g., prep-time for meetings).
Locum Coverage	Reimbursable with invoice; reduced by any practice revenue.
Travel Time	Not reimbursable for Lower Mainland meetings; reimbursable for out-of-province with CEO/Registrar pre-approval.

Table B: Expense reimbursement for board members, committee members and members of advisory working groups

Category	Details
Submission Requirements	Submit within 4 months; receipts required unless allowance applies; missing receipts ≥ $25 require CEO/Registrar pre-approval.
Mileage (CRA Rate)	Reimbursed at CRA’s specified rate.
Local Transportation	Taxi, transit, ferry/toll charges, train, car share, bike share reimbursable; car rental allowed with CEO/Registrar pre-approval.
Parking	Reimbursement based on submitted receipts.

Air Travel	Economy (non-refundable); one checked bag, seat selection reimbursable; may use business class for flights >3 hrs with CEO/Registrar pre-approval.
Accommodation (for required travel > 50 km each way)	Best available rate as per government preferred hotel rates or negotiated BCCNM corporate rates.
Meals (Canada)	Breakfast $25 Lunch $35 Dinner $60
Meals (Outside Canada)	Local currency allowance ***or*** actual receipts above allowance with approval.
Entertainment	Requires CEO/Registrar pre-approval.
Gifts & Miscellaneous	Requires CEO/Registrar pre-approval.

SCHEDULE B - EDUCATION STANDARDS AND INDICATORS FOR EDUCATION PROGRAMS

(Section 6-6)

STANDARD 1: Structure - The program's strategy, policies, procedures, and resources support student preparation to attain and demonstrate the entry-level competencies (ELCs) and BCCNM Standards of Practice for the class of licensure		Total Weight 30%
Indicators		Weight %
1.1	Program governance	3
1.2	Program evaluation	4
1.3	Client and student safety[1] a) Orientation of students and program educators to practice settings b) Regulatory supervision of student activities in all practice learning activities that affect clients c) Regular assessment of student performance in theory, lab, simulation, and practice experiences d) Processes in place to prevent, manage, and learn from safety incidents	 2.5 5 5 2.5
1.4	Qualified program educators who are LPNs, RNs, RMs, RPNs, and NPs and are licensed with BCCNM	3
1.5	Program complement of qualified educators has current competence and is appropriate to support students	5
STANDARD 2: Curriculum – The program's curriculum prepares students to attain and demonstrate the entry-level competencies (ELCs) and BCCNM Standards of Practice for the class of licensure		Total Weight 50%
Indicators		
2.1	Curriculum incorporates the entry-level competencies and BCCNM Standards of Practice[2]	25
2.2	Practice learning experiences support students to attain and demonstrate the entry-level competencies and BCCNM Standards of Practice	15
2.3	Processes in place to communicate program expectations for student practice learning to agency staff/preceptors	5
2.4	Regular processes to evaluate course design and delivery in theory, lab, simulation, and practice learning courses	5
STANDARD 3: Outcome - Graduates of the program attain and demonstrate the entry-level competencies (ELCs) and BCCNM Standards of Practice for the class of licensure		Total Weight 20%
Indicators		
3.1	Licensure exam scores – first time pass rates	8
3.2	Recent graduates' ratings of their perceived preparation to attain and demonstrate the entry-level competencies and BCCNM Standards of Practice	6

[1] Critical Indicator
[2] Critical Indicator

3.3	Feedback from program educators and preceptors on student attainment and demonstration of the entry-level competencies and BCCNM Standards of Practice in the final practice learning experience	6
	Total of Standards 1, 2, 3 Weight	100%

SCHEDULE C - EDUCATION STANDARDS AND INDICATORS FOR CERTIFIED PRACTICE COURSES

(Section 7-4)

Standard 1: Curriculum Standard

The curriculum builds upon the BCCNM Standards of Practice to provide the learning experiences necessary for students to achieve the certified practice competencies and BCCNM Standards of Practice for certification.

Indicators of the Curriculum Standard

a) The course is clearly described, and its foundations are congruent with the achievement of the certified practice competencies and BCCNM Standards of Practice.

b) The course requires students to apply the certified practice competencies and BCCNM Standards of Practice while learning to provide care directly with clients and engaging with interprofessional education and care.

Standard 2: Students Standard

Students demonstrate progress toward the achievement of the certified practice competencies and application of BCCNM Standards of Practice for certification.

Indicators of the Students Standard

a) Students receive well-timed formative and summative feedback to achieve the certified practice competencies and BCCNM Standards of Practice.

b) Students have access to sufficient learning resources to support their achievement of the certified practice competencies and BCCNM Standards of Practice.

c) Program policies and resources support faculty to fail students or remove them from the practice setting for reasons of unprofessional/unethical behaviour or unsafe practice.

d) Students who are successful at course completion have achieved the certified practice competencies and are able to apply the BCCNM Standards of Practice to provide safe, competent, and ethical care.

Standard 3: Course Evaluation Standard

Certified practice course evaluations demonstrate student preparedness for practice upon course completion.

Indicator of the Course Evaluation Standard

a) A plan for implementation of formative and summative course evaluation is clearly presented.

SCHEDULE D - AUTHORIZED TERMS FOR CERTIFIED LICENSEES

(Section 8-10)

Table A: RN Certification Programs – Program-Specific Terms

RN Certification Program	Authorized Terms
Remote Practice	• Remote Practice Certified
Reproductive Health (Sexually Transmitted Infections)[1]	• Reproductive Health (Sexually Transmitted Infections) Certified • Reproductive Health (STI) Certified
Reproductive Health (Contraceptive Management)[1]	• Reproductive Health (Contraceptive Management) Certified • Reproductive Health (CM) Certified
RN First Call	• First Call Certified
Opioid Use Disorder	• Opioid Use Disorder Certified • OUD Certified

Table B: RPN Certification Program – Program-Specific Terms

RPN Certification Program	Authorized Terms
Opioid Use Disorder	• Opioid Use Disorder Certified • OUD Certified

[1] An RN who holds certification in both Reproductive Health certification programs may use the combined term “Reproductive Health (Sexually Transmitted Infections and Contraceptive Management) Certified” or “Reproductive Health (STI and CM) Certified”.

Table C: Midwife Certification Programs – Program-Specific Terms

Midwife Certification Program	Authorized Terms
Surgical First Assist for Cesarean Section	• Surgical First Assist for Cesarean Section Certified
Acupuncture	• Acupuncture Certified
Hormonal Contraceptive Therapy	• Hormonal Contraceptive Therapy Certified
Intrauterine Contraception Insertion	• Intrauterine Contraception Insertion Certified • IUC Insertion Certified
Sexually Transmitted Infections Management	• Sexually Transmitted Infections Management Certified • STI Management Certified
Induction and Augmentation of Labour	• Induction and Augmentation of Labour Certified
Epidural Maintenance	• Epidural Maintenance Certified
Vacuum Assisted Emergency Delivery	• Vacuum Assisted Emergency Delivery Certified

SCHEDULE E - INVESTIGATION EXPENSES

(Section 12-20)

For the purpose of determining investigation expenses, an investigation is deemed to commence on the earliest of the date that

(a) the registrar receives a regulatory report under Division 6 of Part 3 of the Act,

(b) the registrar takes action under section 108 of the Act,

(c) the registrar makes a regulatory complaint under section 119 of the Act,

(d) the registrar receives a regulatory complaint under section 120 of the Act, or

(e) the investigation committee begins an investigation under section 124 of the Act,

and the investigation is deemed to continue until the date on which the registrar disposes of the matter under section 109 or 122 of the Act or the investigation committee terminates the investigation or disposes of the matter under section 136 of the Act.

Subject to any maximum prescribed amount and section 273(3) of the Act, an order for investigation expenses may include the following expenses incurred by the college for the purpose of the investigation during the period of time described above:

(a) up to 50% of actual legal fees;

(b) 100% of actual fees for other reasonable and necessary professional services;

(c) 100% of other reasonable and necessary disbursements (including disbursements incurred by legal counsel and by persons engaged to provide professional services).

SCHEDULE F - SUPPORT WORKER REIMBURSEMENT

(Section 13-11)

Support worker reimbursement for reasonably incurred travel and business expenses:

Expense	**Rate**
Accommodation (for required travel > 50 km each way)	Best available rate as per government preferred hotel rates of negotiated BCCNM corporate rates.
Meals (maximum claim, receipts are required, and alcoholic beverages cannot be claimed)	Breakfast $25 Lunch $35 Dinner $60
Air Travel	Economy (non-refundable); one checked bag; seat selection reimbursable.
Local Transportation	Taxi, transit, ferry/toll charges, train, car share, bike share reimbursable; car rental allowed with pre-approval.
Mileage (CRA rate)	Reimbursed at CRA's specified rate.
Parking	Reimbursement based on submitted receipts.

SCHEDULE G - FEES

TABLE A: LICENSURE APPLICATION FEES • *GST will be added* • *Application fees are non-refundable*		
Practising / Provisional Licensure applications		
Initial application for any of the following classes: • Practising/provisional LPN license • Practising/provisional RPN license • Practising/provisional RN license • Practising/provisional NP license	International applicant	$690.00
	Canadian applicant	$345.00
	B.C. applicant	$265.00
Initial application for the class of practising midwife license (all applicants)		$265.00
Reinstatement application for any of the following classes (all applicants): • practising LPN license • practising RPN license • practising RN license • practising LGN license • practising NP license • practising midwife license		$265.00
Reinstatement surcharge (unlicensed practice) – may apply to any application for reinstatement of practising license		$375.00
Employed Student Licensure applications		
Application for any of the following classes (all applicants): • employed student psychiatric nurse license • employed student nurse license		$175.00
Certified Practice Designation		
Application for certification (initial or reinstatement only)		
• practising/MJL RPN license • practising/MJL RN license		$115.00

TABLE B: ANNUAL LICENSURE FEES (INITIAL, ANNUAL DECLARATION OR REINSTATEMENT) • *GST will not be added* • *Annual fees are refundable subject to BCCNM policy*	
Nurse Licensee Classes	Payable for the period of Apr. 1, 2026 - Mar. 31, 2027
• practising LPN license • provisional LPN license • practising RPN license • provisional RPN license • practising RN license • provisional RN license • practising LGN license • provisional LGN license	$781.10
• practising NP license • provisional NP license	$1,131.50
• employed student psychiatric nurse license • employed student nurse license	$313.90
Multijurisdictional Licensee Classes	Payable for any period of registration that commences in the period Apr. 1, 2026 – Mar. 31, 2027
• multijurisdictional LPN license • multijurisdictional RPN license • multijurisdictional RN license	$149.65
Midwife Licensee Classes	Payable for the period of Apr. 1, 2026 – Mar. 31, 2027
• practising midwife license • provisional midwife license	$1,131.50
• non-practising midwife license (closed class)	$135.05

TABLE C: ADMINISTRATIVE FEES • *GST will not be added except as indicated below* • *Administrative fees are non-refundable*	
Verification of licensure or certificate of professional conduct *(GST will be added)*	$60.00
Not sufficient funds for cheques / pre-authorized payments *(GST will not be added)*	$60.00
Refund processing when licensee requests or gives written consent to cancellation of license (subject to BCCNM policy) *(GST will be added)*	$85.00