

## 2024 Document Definitions and Descriptions

Document Type	Description	Authority	CRNS Consultation	Communication with Council	Notes
<b>The Registered Nurses Act, 1988</b>	Provides the legislative authority for the regulation of the nursing profession in Saskatchewan including the registration, licensing, and practice of Registered Nurses and Graduate Nurses. This legislation has a public interest mandate and provides authority for the creation of bylaws. The legislation defines what constitutes the practice of registered nursing for CRNS members.	<b>Legislation</b>	No regular requirements	No regular requirements	The RN Act, 1988 is set in legislation by the provincial government. The original registered nurses act was proclaimed March 10, 1917.
<b>CRNS Bylaws</b>	Are a set of rules developed and implemented by the organization relating to the governance and regulation of its members and the management of	<b>Legislation</b>	Targeted and broad consultation with key stakeholders and members	Require Council Approval	The authority for profession-led regulation and development of regulatory bylaws comes from section 15(2) of the RN Act, 1988. Bylaws are created internally, vetted through the CRNS Legislation and Bylaws

	its affairs. Bylaws have the full force of the law.				<p>Committee and are approved by Council. Per section 16 of the RN Act, regulatory bylaws created per section 15(2) require Ministerial approval.</p> <p>The CRNS bylaws create two categories for the practice of registered nursing, 1) general practice category; and 2) nurse practitioner category. RN(AAP) is a designation within the general practice category (along with RN and GN). NPs and RN(AAP)s are RNs first, therefore all expectations for registered nurse practice apply. Practicing membership is limited to those who are eligible for a license to practice registered nursing by the CRNS.</p>
<b>Code of Ethics</b>	Sets out the minimum standards of professional behavior and ethical conduct expected of all	<b>Incorporated by reference into the bylaws.</b> Section 15(2)© of the RN Act,	Targeted and broad consultation with key stakeholders and members	Requires Council Approval	Council reviews and adopts a code of ethics for registered nurses. The code of ethics is incorporated by

	practicing CRNS members. Breaches constitute professional misconduct.	1988 provides the authority for a bylaw to be created to provide a Code of Ethics.			reference into CRNS bylaws and approved by the Minister of Health.
<b>Practice Standards</b>	Are formal requirements which outline the minimum level of expected performance of safe, competent and ethical nursing care. Breaches constitute professional incompetence or misconduct.	<b>Incorporated by reference into the bylaws.</b> Section 15(2)(d) and (e) of the RN Act, 1988 provides the authority for a bylaw to be created for setting standards.	Targeted and broad consultation with key stakeholders and members	Require Council Approval	Council approves practice standards for registered nurses. Practice standards are incorporated by reference into CRNS bylaws and approved by the Minister of Health.
<b>Entry-Level Competencies (ELCs)</b>	Are the observable ability of a registered nurse at entry-level that integrates the knowledge, skills, abilities and judgment required to practice nursing safely and ethically. Breaches constitute professional incompetence or misconduct.	<b>Incorporated by reference into the bylaws.</b> Section 15(2)(a) and (d) of the RN Act, 1988 provides the authority for a bylaw to be created for setting standards.	Targeted and broad consultation with key stakeholders and members	Require Council Approval	Entry-level competencies are created at a national level through the Canadian Council of RN Regulators. CRNS Council approves the nationally drafted entry-level competencies for registered nurses. Entry-level competencies are incorporated by reference into CRNS bylaws and approved by the Minister of Health.

<p><b>Council Policies</b></p>	<p>Contain requirements set by the CRNS Council to supplement the RN Act and bylaws. Certain council policies focus on registration practices, administration, and governance of the CRNS. Other policies focus on clinical requirements for practice. Failure to follow a policy can be evidence used to support an allegation of professional incompetence or misconduct.</p>	<p><b>CRNS Council</b></p>	<p>Internal consultation CRNS Advisory Committees Targeted consultation with key stakeholders</p>	<p>Require Council Approval</p>	<p>Practicing CRNS members are required to follow Council policies that outline or define clinical practice.</p>
<p><b>Guidelines</b></p>	<p>Support the application of the standards and competencies and code of ethics and provide direction for registered nursing practice. Nursing practice that is not aligned with guidelines can be evidence used to support an allegation of professional incompetence or misconduct.</p>	<p><b>CRNS Council</b></p>	<p>Targeted and broad consultation with key stakeholders and members</p>	<p>Require Council Approval</p>	<p>Guidelines support the professional practice of CRNS registrants.</p>

<b>Resources</b>	Are situationally specific documents that are narrower than guidelines and respond to nursing practice trends. Nursing practice that is not aligned with resources can be evidence used to support an allegation of professional incompetence or misconduct.	<b>Executive Director</b>	Internal Consultation Possible targeted external consultation	Notice to Council	These documents offer guidance that is aligned with best practice, CRNS strategic endpoints and objectives.
<b>Nursing Practice Updates</b>	Are published and communicated with CRNS registrants when an immediate change in practice occurs.	<b>Executive Director</b>	Internal subject matter experts	Notice to Council	Topics of NPUs may result in the creation or updating of a guideline or resource.
<b>Tools</b>	Are created to incorporate links to multiple CRNS publications for a specific audience.	<b>Executive Director</b>	Internal subject matter experts and targeted consultation as needed.	Notice to Council	Specific audiences include examples such as managers of RNs, CRNS Liaisons and Mentors.