

INVESTIGATION COMMITTEE  
of the  
COLLEGE OF REGISTERED NURSES OF SASKATCHEWAN

-and-

Harpal Singh  
Saskatchewan RN #0051425

---

**DECISION**

of the

**DISCIPLINE COMMITTEE**

of the

COLLEGE OF REGISTERED NURSES OF SASKATCHEWAN

---

Legal Counsel for the Investigation Committee:	Christa Weber
Legal Counsel for Harpal Singh:	None
Harpal Singh	Self-Represented
Legal Counsel for the Discipline Committee:	Brittnee Holliday
Chairperson for the Discipline Committee:	Joanne Petersen, RN

Date of Hearing: **September 10, 2025**

Location: *Via Videoconference*  
College of Registered Nurses of Saskatchewan  
1-3710 Eastgate Drive  
Regina, Saskatchewan  
S4Z 1A5

Date of Decision: **November 28, 2025**

## I. INTRODUCTION

1. The Discipline Committee of the College of Registered Nurses of Saskatchewan (“CRNS”) convened on September 10, 2025, via videoconference, to hear and determine a complaint of professional misconduct against Registered Nurse, Harpal Singh (RN #0051425). The Discipline Committee is established pursuant to section 30 of *The Registered Nurses Act, 1988* (the “Act”).

2. The charges against Harpal Singh are outlined in a Notice of Hearing dated July 29, 2025. There was one charge of professional misconduct, and that charge read as follows:

**1. You, Harpal Singh, are alleged to be guilty of professional misconduct contrary to section 26 of *The Registered Nurses Act, 1988*, in that, on or around May 13, 2024, you submitted a letter of reference with an application for registration with the Yukon Registered Nurses Association that contained information you knew, or ought to have known, was false and misleading.**

3. As a preliminary matter, legal counsel for the Investigation Committee sought to make an amendment to the Charge outlined in the Notice of Hearing, removing “on or around May 13, 2024” and replacing the same with “on May 10, 2024”. The Discipline Committee finds such amendment is clerical in nature and the requested amendment more accurately reflects the content agreed upon in the Agreed Statement of Facts. There was no objection to this minor amendment, and the Discipline Committee has concluded the Charge in the Notice of Hearing (the “Charge”) shall now read:

**1. You, Harpal Singh, are alleged to be guilty of professional misconduct contrary to section 26 of *The Registered Nurses Act, 1988*, in that, on May 10, 2024, you submitted a letter of reference with an application for registration with the Yukon Registered Nurses Association that contained information you knew, or ought to have known, was false and misleading. [emphasis added]**

## **II. RELEVANT LEGISLATION**

4. The Notice of Hearing alleges that Harpal Singh is guilty of professional misconduct contrary to section 26(1), (2), subsection (l) and (q) of the Act, and those provisions provide:

**26(1) For the purpose of this Act, professional misconduct is a question of fact but any matter, conduct or thing, whether or not disgraceful or dishonorable, that is contrary to the best interests of the public or nurses or tends to harm the standing of the profession of nursing is professional misconduct within the meaning of this Act.**

**(2) Without restricting the generality of subsection (1), the discipline committee may find a nurse guilty of professional misconduct if the nurse has:**

...

**(l) failed to comply with the code of ethics of the college;**

...

**(q) contravened any provision of this Act or the bylaws.**

5. The provisions of the CRNS Bylaws, 2023, the Code of Ethics for Registered Nurses (2017), the SRNA Registered Nurse Practice Standards (2019), and the SRNA Registered Nurse Entry-Level Competencies (2019), alleged to have been contravened in the Notice of Hearing are set out in Appendix A of this Decision.

## **III. HEARING**

6. When the Discipline Hearing began on September 10, 2025, neither counsel for the Investigation Committee nor Harpal Singh raised any objection regarding the composition of the Discipline Committee.

7. The Discipline Committee was provided with the following documents:

a) A binder entitled “Document Package for Filing with Discipline Committee Filed on Behalf of the CRNS Investigation Committee” which contained a Notice of Guilty Plea, an Agreed Statement of Facts, the Investigation Committee’s Recommendation on Penalty and Costs, Costs Evidence, and Supporting Case Law; and

b) Financial information provided by Mr. Singh.

8. The following were marked as Exhibits:

Exhibit P1 – Notice of Guilty Plea

Exhibit P2 – Agreed Statement of Facts

Exhibit P3 – CRNS Costs Breakdown

Exhibit D1 – Residential Lease Agreement

Exhibit D2 – [REDACTED] Payment Statements in the name [REDACTED]

Exhibit D3 – [REDACTED] Statement

Exhibit D4 – [REDACTED] Payment Schedule

Exhibit D5 – [REDACTED] Policy Change Confirmation

Exhibit D6 – [REDACTED] Statement

Exhibit D7 – [REDACTED] Invoice

Exhibit D8 – [REDACTED] Statement

Exhibit D9 – [REDACTED] Statement

Exhibit D10 – [REDACTED] Agreement

Exhibit D11 – [REDACTED] Overview and Summary (2)

9. Paragraphs 24 to 26 of the Agreed Statement of Facts, Exhibit P2, (“Agreed Statement of Facts”), state:

**24. Mr. Singh admits to the conduct as stated in the Notice of Hearing, Appendix A, dated July 29, 2025.**

**25. Mr. Singh admits that false and misleading information was submitted with his application for registration with the YRNA. He further admits that he failed to meet his professional responsibilities when he delegated the completion of an important regulatory process to a friend without providing the necessary supervision and oversight, and without verifying the accuracy, content, and authenticity of what was submitted.**

**26. Mr. Singh further admits that his conduct constitutes professional misconduct as defined in section 26 of *The Registered Nurses Act, 1988*, and contravenes the provisions the Code of Ethics for Registered Nurses, and**

**SRNA Registered Nurse Entry-Level Competencies and SRNA Registered Nurse Practice Standards as outlined in Appendix A of the Notice of Hearing.**

10. Harpal Singh further confirmed his guilty plea to the Charge by signing a Notice of Guilty Plea, dated August 5, 2025 (Exhibit P1), and confirming the same at the outset of the Hearing.

**IV. FACTS**

11. Harpal Singh completed his nursing education program at Shri Guru Ram Dass Nursing Institute in India on September 15, 2016 and obtained a Bachelor of Science in Nursing from Baba Farid University of Health and Science. Mr. Singh was licenced as an RN in Ontario in 2022 and began working as a travel RN contractor for a nursing agency, fulfilling term contracts in several care settings.

12. Mr. Singh was registered on January 26, 2024 with the CRNS as a Practicing RN (“Registered Nurse”) and is registered as a Practicing RN through November 30, 2025. Mr. Singh has no prior history of complaints or discipline with the CRNS.

13. Mr. Singh commenced a three-month agency contract in April 2024 where he was employed as an RN at [REDACTED], Saskatchewan.

14. Upon being advised of a potential future agency contract in the Yukon, Mr. Singh made an Application for licensure to the Yukon Registered Nurses Association (“YRNA”) on May 10, 2024.

15. Between May 14 and 15, 2024 the CRNS was contacted by the YRNA regarding Mr. Singh’s Application for licensure with the YRNA. The YRNA identified what was described as a fake employer reference submitted with Mr. Singh’s Application for licensure.

16. On May 16, 2024, the CRNS received a written complaint from the YRNA alleging professional misconduct on the part of Mr. Singh.

17. The crux of the complaint was that an email was sent from an account of “[REDACTED]”, [REDACTED] on Friday, May 10, 2024, at 4:09 p.m. to the YRNA email address of admin@yrna.ca, claiming to provide a reference for Mr. Singh and purporting to be a Nursing Manager at [REDACTED], Saskatchewan. In addition to providing comments in the body of the email that “[Mr. Singh] is a good team player and his dedication towards to work and critical thinking makes him an excellent nurse”, the email attached a YRNA template Reference Form.

18. The Employer Reference Form submitted with Mr. Singh’s Application contained the following inaccuracies:

- The name of the town was mis-spelled as “[REDACTED]” instead of [REDACTED];
- The hospital name was stated to be [REDACTED] instead of [REDACTED];
- The auto-signature showed an extra letter “a” in “[REDACTED]”
- The reference’s title was stated as “Nursing Manager”; and,
- The phone number given for the hospital had a 604 (British Columbia) area code instead of a 306 (Saskatchewan) area code.

19. The YRNA contacted [REDACTED] on May 14, 2024 to inquire about the authenticity of the reference and [REDACTED] confirmed the email used was not her email and the Reference Form provided had not been completed by her. At the time of the incident and complaint, [REDACTED] was [REDACTED]. [REDACTED] confirmed that she was not asked to provide a reference for Mr. Singh or to complete the YRNA Reference Form.

20. On May 15, 2024, Mr. Singh telephoned the YRNA and inquired about his Application. The YRNA representative outlined his concerns regarding the reference letter and advised that the YRNA would not be processing the Application, and they referred their concerns on to Saskatchewan as his current regulator. Mr. Singh persisted in trying to persuade the YRNA representative that the reference was valid and sent by [REDACTED]. Eventually, Mr. Singh admitted that the email address was “created by a friend”.

21. In his written response to the complaint, Mr. Singh stated that it had “come to [his] attention that the reference contained erroneous information” and that, “[u]pon investigation, it [had] been determined that the mistake originated from a typographical error made by a third party, namely [his] friend, during the transmission of the reference”.

22. As set out in the Agreed Statement of Facts (Exhibit P2), if Mr. Singh were to testify, he would confirm:

- a) He agreed to have a friend prepare and manage the registration process for him because he was extremely busy at work in [REDACTED] and there was a short turnaround time for him to acquire a Yukon RN license to be able to secure his next contract;
- b) The friend was a family friend and not a health care professional;
- c) He and the friend created an online Application account on May 10, 2024, on the YRNA website;
- d) He had given the friend full access to his personal laptop and email accounts, so they had all necessary information to assist him;
- e) While he had not personally falsified any information, the friend who submitted the Application on his behalf did so;
- f) He acknowledges that he was fully responsible for ensuring the authenticity and accuracy of the documentation submitted on his behalf and did not do so; and,
- g) He regrets what occurred.

23. As outlined above, through his Guilty Plea (Exhibit P1) and the agreed upon facts in the Agreed Statement of Facts (Exhibit P2), Mr. Singh admits that false and misleading information was submitted with his Application for registration with the YRNA. Mr. Singh further admitted that he failed to meet his professional responsibilities when he delegated the completion of an important regulatory process to a friend without providing the necessary supervision and oversight and without verifying the accuracy, content, and authenticity of what was submitted.

24. Mr. Singh further admitted that his conduct constitutes professional misconduct as outlined in section 26 of the Act and contravenes provision of the Code of Ethics for Registered

Nurses, SRNA Registered Nurse Entry Level Competencies, and the SRNA Registered Nurse Practice Standards.

25. The Discipline Committee finds that the Agreed Statement of Facts and supporting evidence substantiates the Charge, as amended, and the Discipline Committee accepts Mr. Singh's guilty plea to the Charge. Mr. Singh has been found to have contravened section 26(1)(l) and (q) of the Act, as well as the following, which are specifically laid out in Appendix A of the Notice of Hearing and Appendix A of this Decision:

CRNS Bylaws, 2023:

Bylaw XIV Section 1: Code of Ethics of the Association  
Bylaw XV Section 1: Standards and Competencies

Code of Ethics for Registered Nurses (2017)

G: Being Accountable, Ethical Responsibilities (paras. 1 and 2)

SRNA Registered Nurse Entry-Level Competencies (2019):

2. Professional, Section 2.2

SRNA Registered Nurse Practice Standards (2019):

Standard 1: Professional Responsibility and Accountability (para 1)  
Standard 4: Service to the Public (para 35)  
Standard 5: Self Regulation (paras. 49 and 51)

## **V. PROPOSED SANCTION**

26. Having found the Charge is substantiated, and the Guilty Plea is accepted, the next task for the Discipline Committee is the imposition of an appropriate sanction pursuant to section 31 of the Act.

27. The Discipline Committee was presented with a Recommendation on Penalty and Costs by the Investigation Committee, which broadly consisted of the following:

(a) Mr. Singh shall be reprimanded and must complete the PBI Education course on Medical Ethics and Professionalism at his own cost within six months of the effective date of this Order.

- (b) Mr. Singh must meet with a CRNS Practice Advisor within one month after completing the course to discuss the conduct for which he was found guilty of professional conduct, the consequences to the public, the profession and himself, and the conduct that is expected of him when dealing with regulatory bodies, providing in advance of the meeting the Notice of Hearing, Agreed Statement of Facts, Order and Decision of the Discipline Committee and proof of completion of the required course and keeping his contact information up to date with the CRNS;
- (c) A fine of \$1,000.00; and,
- (d) Costs of the investigation and hearing process in the amount of \$4,300.00 within four years of the effective date of any Order.

28. It is understood that Mr. Singh agreed to all aspects of the Investigation Committee's Recommendation on Penalty and Costs, except the fine and costs portion.

29. Several factors are considered when determining an appropriate sanction for a professional. While the list is not intended to be exhaustive, a frequently cited list of factors established by case law can be found in the decision of *Jaswal v Medical Board (Newfoundland)*, 1996 CanLII 11630 (NL SC), 138 Nfld & PEIR 181 [“*Jaswal*”], at paragraph 35:

1. **the nature and gravity of the proven allegations**
2. **the age and experience of the offending physician**
3. **the previous character of the physician and in particular the presence or absence of any prior complaints or convictions**
4. **the age and mental condition of the offended patient**
5. **the number of times the offence was proven to have occurred**
6. **the role of the physician in acknowledging what had occurred**
7. **whether the offending physician had already suffered other serious financial or other penalties as a result of the allegations having been made**
8. **the impact of the incident on the offended patient**
9. **the presence or absence of any mitigating circumstances**
10. **the need to promote specific and general deterrence and, thereby, to protect the public and ensure the safe and proper practice of medicine**
11. **the need to maintain the public's confidence in the integrity of the medical profession**

12. the degree to which the offensive conduct that was found to have occurred was clearly regarded, by consensus, as being the type of conduct that would fall outside the range of permitted conduct
13. the range of sentence in other similar cases

30. In *Camgoz v College of Physicians and Surgeons (Sask.)*, 1993 CanLII 8952, 114 Sask R 161, the Court of Queen's Bench, as it then was, also outlined the *Jaswal* factors as factors to consider when determining penalty. The Court specifically noted that the list is not exhaustive and does not mean that each specified factor will be relevant in every instance. As such, the factors need to be considered in relation to the specific facts of each case.

31. The Discipline Committee reviewed the *Jaswal* factors and would like to emphasize that dishonesty and a lack of transparency and accountability cannot be tolerated in the nursing profession. Mr. Singh delegated the completion of an important regulatory process to a friend without providing the necessary supervision and oversight and without verifying the accuracy, content, and authenticity of what was submitted, resulting in inaccurate and misleading information being submitted to the YRNA with his application for licensure. This included a falsified email address and reference letter.

32. When confronted with the erroneous reference, Mr. Singh first tried to convince the YRNA that the reference was legitimate; however, upon further discussion and being confronted with information that the person who had been purported to give the reference had been contacted and denied knowledge of the same, Mr. Singh eventually admitted the email address was created by a friend. Further, in his written response to the complaint, Mr. Singh downplayed the issue and failed to take appropriate accountability, suggesting it was a mistake and typographical error made by his friend when submitting the Application. Honesty is paramount in nursing practice and Mr. Singh initially tried to convince the YRNA the reference was legitimate and also understated the gravity of the issue when pressed and in his written response. With that said, Mr. Singh has admitted it was his Application and responsibility to ensure that truthful information was provided, albeit the demonstrated reluctance to take responsibility for his actions.

33. The Discipline Committee concludes Mr. Singh's conduct and behavior fall far outside the limits of acceptable conduct.

34. The Discipline Committee also considered that this was Mr. Singh's first disciplinary matter, it was an isolated event and not a pattern of conduct, he was a relatively new RN, no patient was placed at risk, and Mr. Singh eventually admitted his wrongdoing and pled guilty to professional misconduct contrary to section 26 of the Act.

35. Similarly, the Discipline Committee understands that Mr. Singh has already experienced consequences of his actions. Mr. Singh had a pending contract with the [REDACTED] [REDACTED] that was cancelled, and he has struggled to obtain employment because of this pending disciplinary matter, currently being unemployed. The Discipline Committee acknowledges that Mr. Singh has experienced financial consequences already.

36. While these mitigating factors played heavily in the Discipline Committee's decision, the Discipline Committee finds, after applying the appropriate sentencing principles, that the penalty proposed by the Investigation Committee is appropriate, fit, reasonable, consistent with the public interest mandate of the CRNS, within the range of appropriate disposition, and promotes specific and general deterrence. A written reprimand will reinforce that professional and ethical competency are equally important in clinical settings and regulatory compliance and will create accountability and transparency by publicly documenting the conduct and that the CRNS cannot tolerate dishonesty. Further, the course on Ethics, followed by a meeting with a CRNS Practice Advisor to discuss the conduct offers an opportunity to support rehabilitation and professional growth. In particular on the aspect of penalty not agreed to by Mr. Singh, the Discipline Committee determined a fine of \$1,000.00 is reasonable and appropriate, being inline with other penalties imposed upon individuals for similar misconduct. The \$1,000.00 fine is a nominal amount that denounces the conduct without causing an undue financial hardship.

37. To support its decision, the Discipline Committee reviewed the decisions of: *Khatami v Real Estate Council of British Co.*<sup>1</sup>, *Saskatchewan Association of Licensed Practical Nurses*

---

<sup>1</sup> 2016 CanLII 22224

*v Valera*<sup>2</sup>, *College of Physicians and Surgeons of Saskatchewan v Dr. Maree*<sup>3</sup>, *Thompson (Re) 2020 v The Real Estate Council of Alberta*<sup>4</sup> and *Sood 2019 v The Real Estate Council of British Columbia*<sup>5</sup>.

## VI. COSTS

38. Exhibit P3 outlines the total approximate costs to the CRNS in this professional disciplinary proceeding as \$21,822.30. Although this is described as the total actual and anticipated costs, the Investigation Committee's recommendation asks that Mr. Singh would pay \$4,300.00 or 24% of total actual and anticipated costs.

39. Mr. Singh took the position that he was unable to pay \$4,300.00 in costs, relying on the Exhibits D1 to D11. Mr. Singh pointed out that his utility bill will increase over winter and that he is already borrowing \$900.00 per month to make ends meet. In addition, Mr. Singh stated he has not been able to obtain an RN position because of the fact he has been referred to the CRNS for Discipline in this matter.

40. The Discipline Committee gave considerable thought to the costs sought to be imposed upon Mr. Singh. Each Exhibit from D1 to D 11 regarding Mr. Singh's monthly payments was reviewed by the Discipline Committee and the Discipline Committee also considered the added requirement for Mr. Singh to undertake the PBI Education Course.

41. The Discipline Committee reviewed *The College of Physicians and Surgeons of Saskatchewan v Leontowicz*<sup>6</sup> in assessing costs. In brief, the Discipline Committee looked at whether the costs are so large that they are punitive or that they are likely to deter a member from raising a legitimate defence, the members financial status, and whether the costs would impose an undue hardship. The Discipline Committee is also aware of the recent Alberta Court

---

<sup>2</sup> <https://clpns.com/wp-content/uploads/2024/01/Discipline-Committee-C.-Valera-Written-Reasons-October-22-2023.pdf>

<sup>3</sup>[https://www.cps.sk.ca/imis/web/PhysicianSearch/Activity\\_Viewer.aspx?SEQN=1622004&Doc=Council%20Decision](https://www.cps.sk.ca/imis/web/PhysicianSearch/Activity_Viewer.aspx?SEQN=1622004&Doc=Council%20Decision)

<sup>4</sup> 2020 CanLII ABRECA 128

<sup>5</sup> 2019 CanLII 37499

<sup>6</sup> 2023 SKCA 110

of Appeal decision in *Charkhandeh v College of Dental Surgeons of Alberta*<sup>7</sup>, which provided new factors to consider regarding costs orders, setting out the types of costs that would be appropriately borne by a member of a regulated profession and removing any link between the seriousness of the charges and the amount of the costs award.

42. This Discipline Committee has concluded that it is not bound by the *Charkhandeh* decision and that this case remains one in which it would be appropriate for Mr. Singh to bear a portion of costs. The Alberta Court of Appeal's approach in *Charkhandeh* is inconsistent with the analysis of costs undertaken by most Canadian courts, including in the recent decision in *Moore v College of Chiropractors*<sup>8</sup>. In *Moore*, the Ontario Superior Court maintained that it is reasonable to impose costs on a regulated professional as a way to prevent the profession from bearing the expense of disciplinary proceedings and that the overall costs order must be proportionate.

43. It was reviewed that the imposition of \$4,300.00 in costs with four years to complete payment would amount to a monthly payment of under \$90.00 for Mr. Singh. In such case, the Discipline Committee concludes this would not cause undue hardship for Mr. Singh, in noting his ongoing expenses, and such costs were fair, reasonable, and proportionate. The Discipline Committee further notes that Mr. Singh will be relieved of some of his monthly payments soon.

## **VII. ORDER**

44. In light of the above conclusions, the Discipline Committee makes the following Order pursuant to section 31 of the Act:

1. Pursuant to section 31(1)(d) of *The Registered Nurses Act, 1988* (the "Act"), Harpal Singh (hereafter "Mr. Singh") shall be reprimanded in writing.
2. Pursuant to section 31(1)(c) of the Act, Mr. Singh may continue to practice under the condition that he successfully completes the PBI Education course on Medical Ethics and Professionalism (ME-15), at his own cost, within six months of the effective date of this Order and provides proof of successful completion to the CRNS Registrar or designate.

---

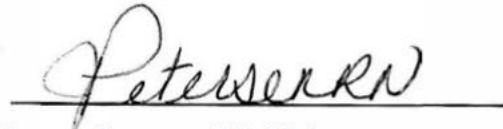
<sup>7</sup> 2025 ABCA 258

<sup>8</sup> 2025 ONSC 6290

3. Pursuant to section 31(1)(e) of the Act, Mr. Singh shall:
  - a) meet with a CRNS Practice Advisor within one month after completing the course to discuss, to the satisfaction of the Practice Advisor, the following:
    - i. The conduct for which he was found to have committed professional misconduct;
    - ii. The potential and actual consequences of the misconduct to the public, the profession, and himself; and,
    - iii. The conduct that is expected of him when dealing with regulatory bodies and their processes, and how he will meet those expectations in the future.
  - b) at least seven days before the discussion, provide the CRNS Practice Advisor with a copy of:
    - i. the Notice of Hearing;
    - ii. the Agreed Statement of Facts;
    - iii. the Order of the Discipline Committee;
    - iv. a copy of the Decision of the Discipline Committee; and,
    - v. proof of completion of the required course.
  - c) ensure that the Registrar is provided with updated and current telephone, address and email information and on an ongoing basis for so long as he is subject to any continuing conditions or restrictions of the Discipline Order.
4. Pursuant to section 31(2)(a)(i) of the Act, Mr. Singh shall pay a fine in the amount of \$1,000.00.
5. Pursuant to section 31(2)(a)(ii) of the Act, Mr. Singh shall pay costs of the investigation and hearing process fixed in the amount of \$4,300.00.
6. The fine and costs shall be paid within four years of the effective date of this order. Pursuant to section 31(2)(b) of the Act, failure to pay the fine and costs within the time set by the Discipline Committee shall result in the immediate suspension of Mr. Singh's license until payment is made in full.
7. Pursuant to section 31(1)(e) of the Act, a copy of the Decision of the Discipline Committee, Order, and the Written Reprimand shall be posted on the CRNS website.

45. Pursuant to section 31(3) of the Act, a copy of this decision shall be sent to Harpal Singh and the complainant.

**November 28, 2025**



Joanne Petersen, RN Chairperson  
*On behalf of Members of the Discipline Committee*  
Anne Kokesch, RN  
Michell Jesse, RN  
Jodi Romanow, RN  
Leah Currie, Public Representative

Pursuant to section 31(1)(e) of the Act, a copy of this decision will also be forwarded to:

- (a) The editor of the CRNS news bulletin and the administrator for the CRNS website;
- (b) All Canadian Registrars of registered nurses;
- (c) College of Licensed Practical Nurses of Saskatchewan;
- (d) College of Psychiatric Nurses Association of Saskatchewan;
- (e) The College of Physicians and Surgeons of Saskatchewan; and,
- (f) Any other jurisdictions or other stakeholders as may be seen as appropriate by the Registrar.

#### Right of Appeal

Pursuant to section 34(1) of *The Registered Nurses Act, 1988*, a nurse who has been found guilty by the discipline committee or who has been expelled pursuant to section 33 may appeal the decision or any order of the discipline committee within 30 days of the decision or order to:

- (a) the council by serving the executive director with a copy of the notice of appeal;  
or
- (b) a judge of the court by serving the executive director with a copy of the notice of appeal and filing it with a local registrar of the court.

## **“Appendix A”**

### **LEGISLATION, BYLAWS, CODE OF ETHICS, PRACTICE STANDARDS & COMPETENCIES CONTRAVENED:**

#### **The Registered Nurses Act, 1988**

26(1) For the purpose of this *Act*, professional misconduct is a question of fact but any matter, conduct or thing, whether or not disgraceful or dishonourable, that is contrary to the best interests of the public or nurses or tends to harm the standing of the profession of nursing is professional misconduct within the meaning of this *Act*.

(2) Without restricting the generality of subsection (1), the discipline committee may find a nurse guilty of professional misconduct if the nurse has:

...

(l) failed to comply with the code of ethics of the college;

...

(q) contravened any provision of this Act or the bylaws.

#### **CRNS Bylaws, 2023**

Bylaw XIV Section 1: Code of Ethics of the Association

Bylaw XV Section 1: Standards and Competencies

#### **Code of Ethics for Registered Nurses (2017)**

##### **G. Being Accountable**

Nurses are accountable for their actions and answerable for their practice.

###### ***Ethical responsibilities:***

1. Nurses, as members of a self-regulating profession, practise according to the values and responsibilities in the *Code* and in keeping with the professional standards, laws and regulations supporting ethical practice.
2. Nurses are honest and practise with integrity in all of their professional interactions. Nurses represent themselves clearly with respect to name, title and role.

#### **SRNA Registered Nurse Entry-Level Competencies (2019)**

##### **2. Professional**

Registered nurses are professionals who are committed to the health and well-being of clients. Registered nurses uphold the profession’s practice standards and ethics and are accountable to the public and the profession. Registered nurses demonstrate accountability, accepts responsibility and seeks assistance as necessary for decisions and actions within the legislated scope of practice.

2.2 Demonstrates a professional presence, and confidence, honesty, integrity and respect in all interactions.

Professional presence is the demonstration of respect, confidence, integrity, optimism, passion and empathy in accordance with professional standards,

guidelines and codes of ethics. It includes a nurse's verbal and nonverbal communications and the ability to articulate a positive role and professional image, including the use of full name and title. The demonstration of professional presence leads to trusting relationships with clients, families, communities and other health care team members. (College of Nurses of Nova Scotia, 2019, p. 2)

### **SRNA Registered Nurse Practice Standards (2019)**

#### **Standard 1: Professional Responsibility and Accountability**

The registered nurse is responsible for practicing safely, competently and ethically, and is accountable to the client, public, employer and profession.

The registered nurse upholds this standard by:

1. Being accountable and accepting responsibility for their own actions and decisions.

#### **Standard 4: Service to Public**

The registered nurse demonstrates leadership in quality and ethical nursing practice, delivery of health care services and establishing professional relationships.

The registered nurse upholds this standard by:

35. Demonstrating professional presence and modelling professional behaviour.

#### **Standard 5: Self-Regulation**

The registered nurse demonstrates an accountability to regulate themselves in accordance with their legislated scope of practice.

The registered nurse upholds this standard by:

49. Practicing in accordance with *The Registered Nurses Act, 1988*, other current relevant legislation, bylaws, scope of practice, standards, entry-level competencies, guidelines and employer policies.
51. Recognizing and addressing professional practice, legal or ethical violations by themselves or others in a timely and appropriate manner.