

ANNUAL REPORT 2012

RAPPORT ANNUEL 2012



CELEBRATING 70 YEARS OF EXCELLENCE IN NURSING EDUCATION!

CÉLÈBRE 70 ANS D'EXCELLENCE DANS L'ENSEIGNEMENT
DES SCIENCES INFIRMIÈRES !



PRESIDENTS OF CASN

<i>Kathleen Ellis</i>	<i>1942-1948</i>
<i>Evelyn Mallory</i>	<i>1948-1950</i>
<i>Jean Forest</i>	<i>1952-1954</i>
<i>Electa MacLennan</i>	<i>1954-1956</i>
<i>Ruth Morrison</i>	<i>1956-1960</i>
<i>Jenny Weir</i>	<i>1960-1962</i>
<i>Hazel Keeler</i>	<i>1962-1964</i>
<i>Catherine Aikin</i>	<i>1964-1966</i>
<i>Margaret Hart</i>	<i>1966-1968</i>
<i>Margaret McPhedren</i>	<i>1968-1970</i>
<i>Beth McCann</i>	<i>1970-1972</i>
<i>Elizabeth Logan</i>	<i>1972-1974</i>
<i>Ruth McClure</i>	<i>1974-1976</i>
<i>Dorothy Kergin</i>	<i>1976-1980</i>
<i>Amy Zelmer</i>	<i>1980-1982</i>
<i>Joan Gilchrist</i>	<i>1982-1984</i>
<i>Marie France Thibaudeau</i>	<i>1984-1986</i>
<i>Alice Baumgart</i>	<i>1986-1988</i>
<i>Jenniece Larsen</i>	<i>1988-1991</i>
<i>Deborah Tamlyn</i>	<i>1991-1993</i>
<i>Denise Alcock</i>	<i>1993-1995</i>
<i>Marilyn Woods</i>	<i>1995-1997</i>
<i>Dot Pringle</i>	<i>1997-1999</i>
<i>Kathryn May</i>	<i>1999-2000</i>
<i>Marianne Lamb</i>	<i>2000-2002</i>
<i>Carole Orchard</i>	<i>2002-2004</i>
<i>Ellen Rukholm</i>	<i>2004-2006</i>
<i>Lise Talbot</i>	<i>2006-2008</i>
<i>Lynnette Leeseberg</i>	<i>2008-2010</i>
<i>Clémence Dallaire</i>	<i>2010-2012</i>



CASN'S MISSION

MISSION DE L'ACÉSI

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

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

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

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

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BENEFITS OF CASN MEMBERSHIP

Participation in Nursing Education Leadership:

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

Opportunities for Networking:

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

CASN IS ACTING FOR YOU!

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

AVANTAGES DE L'ADHÉSION À L'ACESI

Contribution au leadership en formation infirmière

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

Réseautage

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

L'ACESI EST LÀ POUR VOUS!

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

PRESIDENT'S MESSAGE

Dear Colleagues,

As CASN celebrates its 70th anniversary, this is an opportune moment to reflect on its past and to look to the future. Our organization was launched at a ground breaking meeting of nurse educators in June of 1942. Representing eleven universities, a visionary group of nursing leaders met at the Windsor Hotel in Montreal to take counsel from one another. At this meeting, they set in motion the creation of a national organization for nursing education, elected Kathleen Ellis of Saskatchewan to be its first President, and gave the proposed organization the mission of determining desirable standards for nursing education, promoting improvements in the standards of existing programs, and strengthening international relationships among university Schools of Nursing.

Much has been achieved in nursing education since this historic meeting in 1942. Seventy years later, however, CASN continues to work on the very goals set by this small, dedicated group of nurses. We continue for example to build and update the organizational structure first conceived of on that day. Last November following a comprehensive review, CASN Council members passed 32 motions to approve changes to its bylaws as a first step towards reincorporating CASN under the new Canada Not-for-profit Corporations Act (NFP Act). These changes have brought greater clarity and flexibility to our operations.

The goal of formulating national standards for nursing education has remained a central activity of the organization throughout its 70 years and in the past year we continued to provide national standards for nursing education through the CASN accreditation program, developed position papers on nursing education, and published a series of national consensus based documents on current areas of interest.

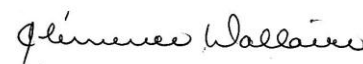
CASN continues to vigorously promote the quality of nursing education and scholarship in Canada through a multitude of activities including workshops, conferences, and the development of learning tools. We have also maintained the goal set in Montreal in 1942 to foster international relationships among nurse educators. To this end, CASN is acting as the secretariat of the Global Alliance for Nursing

Education and Scholarship (GANES) and is working with other members of this alliance to offer an international post conference workshop at ICN next June on academic leadership in nursing.

We have added new goals to our original mission over the years and recently renewed an emphasis on advocacy for nursing education. An issue of importance that arose during 2012 was the decision by the nursing regulatory bodies in Canada to replace the existing Canadian entry-to-practice exam with an exam prepared by the National Council of State Boards of Nursing in the United States, effective 2015. CASN's Advocacy Committee has been working to gather and disseminate information on this and to prepare and support nursing education in this transition.

The two years of my Presidency have been challenging and exciting. The new by-laws and policies, the guidance of an effective Executive Director, and the diligent support of staff have increased CASN's capacity to respond to issues as the voice of nursing education in Canada. I have greatly valued the collaboration of multiple partners in carrying out projects to advance the quality of nursing education in Canada. I have also greatly appreciated the dedication, passion, and conviction of all CASN Board members. I would like to congratulate Linda Ferguson as she steps into the role of CASN President, and I look forward to the transformations that she will lead over the next two years.

Sincerely,



Clémence Dallaire
President
Canadian Association of Schools of Nursing

MESSAGE DE LA PRÉSIDENTE

Chères collègues,

Le moment semble opportun, alors que l'ACESI célèbre son 70^e anniversaire, de faire un retour sur le passé de l'organisation et d'essayer d'entrevoir son avenir. Notre organisme a été fondé à l'occasion d'une rencontre d'infirmières enseignantes qui allait s'avérer révolutionnaire. En juin 1942, en effet, un groupe de personnes visionnaires représentant les sciences infirmières de onze universités s'est réuni à l'hôtel Windsor de Montréal. Lors de cette réunion, elles ont jeté les bases d'un organisme national dédié à la formation infirmière; elles ont élu Kathleen Ellis, de Saskatchewan, comme présidente fondatrice; et elles ont donné à la nouvelle organisation la triple mission d'établir les critères d'excellence pour la formation infirmière, de promouvoir l'amélioration des programmes existants et de renforcer les relations entre les facultés de sciences infirmières à l'échelle internationale.

Même si beaucoup de choses ont été réalisées depuis cette rencontre historique, l'ACESI travaille toujours, soixante-dix ans plus tard, à la réalisation des objectifs qu'avait établis ce petit groupe d'infirmières dédiées ou engagées. Nous continuons par exemple de construire et d'entretenir la structure organisationnelle mise en place ce jour-là. En novembre dernier, à la suite d'un examen approfondi, les membres du Conseil de l'ACESI ont voté l'adoption de 32 propositions visant à modifier le règlement de l'association – un premier pas vers le renouvellement de la constitution de l'ACESI pour la rendre conforme à la Loi canadienne sur les organisations à but non lucratif. Les modifications adoptées clarifient nos opérations et les rendent plus fluides.

L'objectif visant à formuler des critères nationaux pour la formation infirmière est demeuré au centre de l'activité de l'association tout au long de ses 70 années d'existence. L'an dernier, nous poursuivions notre travail en ce sens grâce au programme d'agrément de l'ACESI. Nous avons également produit des énoncés de politiques sur la formation infirmière et publié une série de documents fondés sur un consensus national au sujet de questions qui rejoignent nos intérêts actuels.

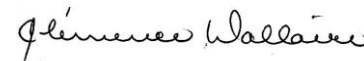
L'ACESI veille activement à promouvoir la qualité de la formation et l'avancement des connaissances en sciences infirmières au Canada, par ses nombreuses activités comme des ateliers, des conférences et la création d'outils d'apprentissage. Nous avons également progressé vers l'objectif établi à Montréal en 1942 de cultiver les relations entre les éducateurs en sciences infirmières du monde entier,

notamment en assumant le secrétariat de la Global Alliance for Nursing Education and Scholarship (GANES) et en collaborant avec les membres de cette alliance à l'organisation d'un atelier international sur le leadership universitaire en sciences infirmières, qui aura lieu après le colloque du CII, en juin prochain.

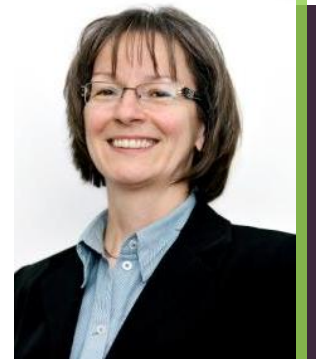
Au fil du temps, d'autres objectifs se sont ajoutés à notre mission originale et nous avons entrepris, ces dernières années, de rehausser l'importance accordée à la promotion des intérêts de la formation infirmière. En 2012, un sujet d'importance a retenu notre attention, soit la décision prise par les organismes canadiens de réglementation en sciences infirmières de remplacer, à partir de 2015, l'actuel examen d'accès à la pratique professionnelle par un examen préparé par le National Council of State Boards of Nursing des États-Unis. Le comité de promotion des intérêts de l'ACESI s'est occupé de rassembler et de diffuser de l'information à ce sujet et s'efforce de préparer et de soutenir le milieu de la formation infirmière pendant la transition.

Mes deux années de présidence ont été stimulantes et palpitantes, je dois le dire. Nouvelles règles et nouvelles politiques, soutien avisé d'une directrice générale efficace et engagement consciencieux du personnel sont autant de ressources qui renforcent la capacité d'intervention de l'ACESI en tant qu'organisme porte-parole de la formation infirmière au Canada. Dans la réalisation des projets visant à améliorer la qualité de cette formation, la collaboration de nombreux partenaires m'a été extrêmement précieuse. J'ai aussi apprécié le dévouement, l'enthousiasme et la conviction qui animent chacun des membres du conseil d'administration de l'ACESI. Je tiens en particulier à féliciter Linda Ferguson, qui prend la relève au poste de présidente de l'ACESI; les transformations qu'elle saura concrétiser au cours des deux années qui viennent sont fort attendues.

Avec mes meilleures salutations,



Clémence Dallaire
Présidente
Association Canadienne des Écoles de Sciences Infirmières



EXECUTIVE DIRECTOR'S MESSAGE

Dear Colleagues,

The CASN National Office is charged with implementing the activities of the CASN's Strategic Plan 2009-2014 and I am pleased to share with you some of the key activities carried out in 2011-2012. Four major priorities in the strategic plan provide operational direction. They include: 1) advancing and unifying CASN's voice for nursing education leadership, partnership and policy; 2) governing excellence in nursing education through accreditation; 3) strengthening the standards of excellence for nursing education through research and scholarship; and 4) optimizing nursing education resources including student, faculty and fiscal.

Advocacy is a key to advancing "CASN's voice for nursing education, leadership, partnership and policy". An issue for nursing educators and students in 2011-2012 has been a decision by Canadian regulators to shift to a new entry-to-practice exam provider in 2015. CASN has acted as a voice for nursing education by consulting with educators throughout the country regarding this change and by communicating their concerns and desire for involvement to each nursing regulatory body in Canada. Information on the new exam is being gathered systematically for dissemination to educators through a Working Group of the CASN Advocacy Committee. Strategies are also being developed with a view to providing support in the transition to the new exam.

During this year, the CASN Advisory Committee on Accreditation (ACAP) has been actively contributing to the goal that CASN "govern excellence in nursing education through accreditation". ACAP has been engaged in clarifying what constitutes a "program" and what is a "stream" for accreditation purposes. It has also made several recommendations to the Board of Directors that have resulted in enhancements to the interpretations of the accreditation standards.



A number of special projects to further CASN's goal of strengthening "standards of excellence for nursing education through research and scholarship" were completed during the year in special projects. The Palliative and End-of-Life Care and the Internationally Educated Nurses projects were completed in March 2012. CASN is enthusiastic about the value of the project documents published and disseminated nationally. Currently, CASN is finalizing a document in a joint project with the Aboriginal Nurses Association of Canada, disseminating work on the integration of Cultural Competence and Cultural Safety in Nursing Education in Canada, and we look forward to sharing the results with you in the new year. The CASN Standing Committee on Education has been sponsoring several key initiatives to strengthen standards of excellence in nursing education. After an extensive consultation phase with stakeholders across the country, CASN's *National Framework of Guiding Principles and Essential Components to Guide Nurse Practitioner Education Programs in Canada* has been completed, and the development of Guiding Principles and Essential Components for Masters and for Baccalaureate Education has been initiated.

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

I would like to take this opportunity to thank the many dedicated nursing educators who have contributed so effectively to CASN's work over the year and look forward to working with all of you throughout the coming year.

Sincerely,

A handwritten signature in dark ink that reads "Cynthia Baker". The signature is fluid and cursive, with the first name being more prominent.

Cynthia Baker

MESSAGE DE LA DIRECTRICE GÉNÉRALE

Chères collègues,
Chers collègues,

Le Secrétariat national de l'ACESI a la responsabilité de mettre en œuvre le plan stratégique de l'association pour la période de 2009 à 2014 et je vous écris pour vous faire connaître les principales activités menées en ce sens pendant l'année 2011-2012. Les opérations de l'ACESI sont déterminées par quatre priorités du plan stratégique. Il s'agit : 1) de promouvoir le rôle de l'ACESI à titre de porte-parole unique à l'égard du leadership, des partenariats et des politiques en enseignement des sciences infirmières; 2) gérer l'excellence dans l'enseignement des sciences infirmières grâce à l'agrément; 3) de resserrer les normes d'excellence pour l'enseignement des sciences infirmières par l'entremise de la recherche et de l'avancement des connaissances; 4) d'optimiser les ressources étudiantes, enseignantes et financières pour l'enseignement des sciences infirmières.

La défense des intérêts est un élément clé dans la promotion « du rôle de l'ACESI à titre de porte-parole unique à l'égard du leadership, des partenariats et des politiques en enseignements des sciences infirmières ». L'un des enjeux pour les enseignants et les étudiants en sciences infirmières en 2011-2012 a été la décision des organismes canadiens de réglementation en sciences infirmières d'adopter, à partir de 2015, un nouvel examen d'accès à la pratique professionnelle. L'ACESI s'est faite la porte-parole du milieu de la formation infirmière en consultant les enseignants de tout le pays au sujet de ce changement et en faisant connaître leurs préoccupations et leur désir de participation à chacun des organismes de réglementation concernés. Toute l'information sur le nouvel examen, est en train d'être recueillie de manière systématique, et sera diffusée aux enseignants par l'intermédiaire d'un groupe de travail du comité de défense de l'ACESI. Nous travaillons également à la mise au point de stratégies de soutien afin de faciliter la transition.

Au cours de l'année écoulée, le comité consultatif de l'ACESI sur l'agrément (CCAA) a contribué activement à l'atteinte de l'objectif qui consiste à « gérer l'excellence dans l'enseignement des sciences infirmières grâce à l'agrément ». Le CCAA a travaillé à la clarification des notions de programme et de filière du point de vue de l'agrément. Il a également formulé à l'intention du conseil d'administration plusieurs recommandations qui se sont traduites par une amélioration de l'interprétation des normes de l'agrément.

Bon nombre de projets spéciaux concernant l'objectif de l'ACESI de resserrer « les normes d'excellence pour l'enseignement des sciences infirmières par l'entremise de la recherche et de l'avancement des connaissances » ont été atteints cette année. Les projets sur les soins palliatifs et les soins de fin de vie ainsi que sur les infirmières formées à l'étranger ont été terminés en mars 2012, et l'ACESI est heureux de la qualité des documents publiés et diffusés à l'échelle nationale. À l'heure actuelle, dans le cadre d'un projet conjoint avec l'Association des infirmières et infirmiers autochtones du Canada, nous sommes en train de mettre la touche finale à un document portant sur les travaux d'intégration des compétences [et de la sécurité] culturelle dans la formation infirmière au Canada; les résultats circuleront en début d'année. Par ailleurs, le comité permanent de l'ACESI sur la formation a commandité plusieurs projets importants pour le renforcement des critères d'excellence en formation infirmière. Après une phase de consultation étendue des intervenants de tout le pays, la version définitive du document Cadre national de principes directeurs et éléments essentiels pour la formation des infirmières et infirmiers praticiens du Canada est terminée, et la préparation des Principes directeurs et éléments essentiels pour la formation à la maîtrise et au baccalauréat est en cours.

Notre travail sur le sondage de l'ACESI et de l'AIIC auprès des étudiants et des professeurs nous fait progresser vers l'objectif du plan stratégique qui consiste à « optimiser les ressources étudiantes, enseignantes et financières pour l'enseignement des sciences infirmières ». On soulignera notamment le besoin constant d'augmenter le nombre d'enseignants afin d'éviter la pénurie qui s'annonce. Les résultats du sondage sont affichés sur le site Web de l'ACESI.

Je profite de l'occasion pour remercier les nombreux et dévoués enseignants en sciences infirmières qui ont contribué de manière si efficace à la tâche de l'ACESI pendant l'année. C'est avec enthousiasme que je vous retrouve tous pour poursuivre ensemble le travail amorcé.

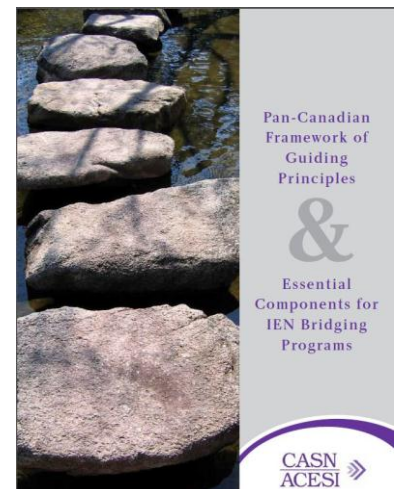
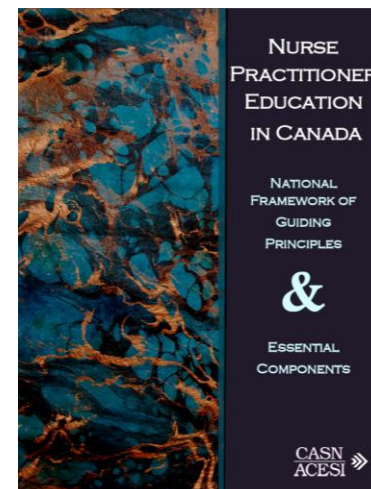
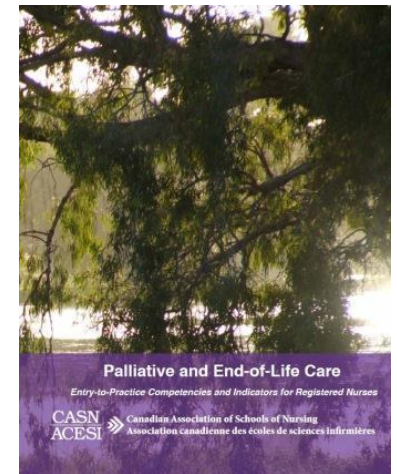
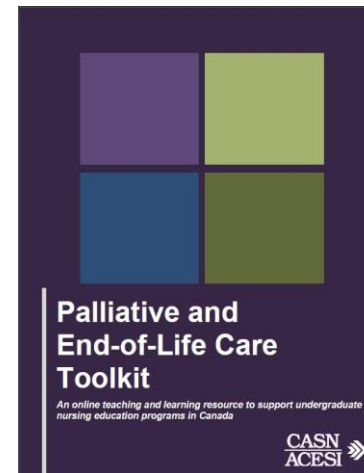
Salutations distinguées,



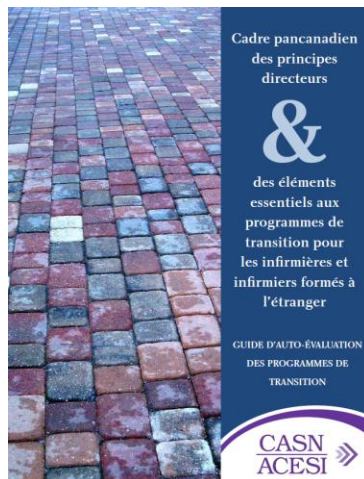
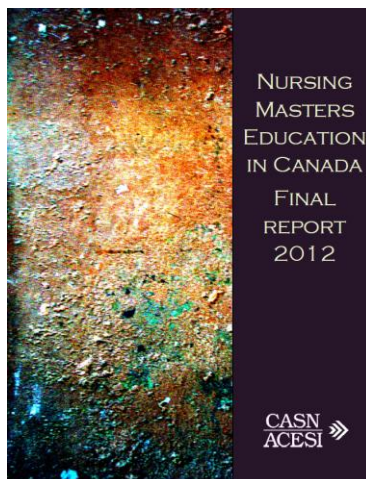
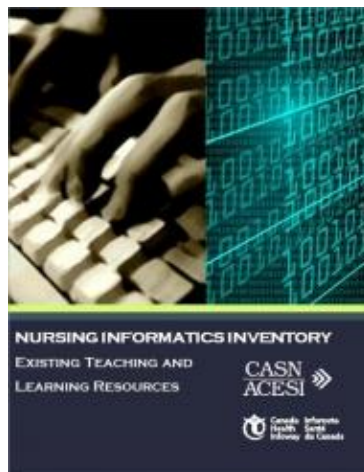
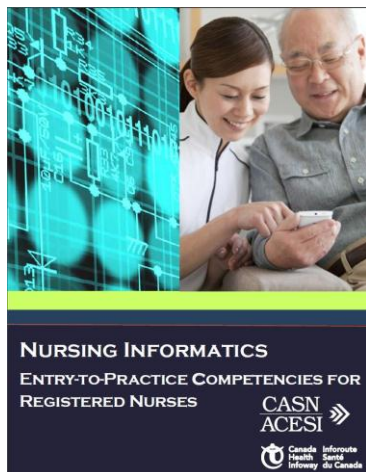
Cynthia Baker

MILESTONE PUBLICATIONS

- *Masters Education in Canada: Final Report 2012*
- *Nurse Practitioner Education in Canada: National Framework of Guiding Principles and Essential Components*
- *Pan-Canadian Framework of Guiding Principles and Essential Components for Internationally Educated Nurses (IEN) Bridging Programs.*
- *Final Report on the Pan-Canadian Framework of Guiding Principles and Essential Components for Internationally Educated Nurses (IEN) Bridging Programs- 2012*
- *Pan-Canadian Framework of Guiding Principles and Essential Components for Internationally Educated Nurses (IEN) Bridging Programs- Self Assessment Guide – 2012*
- *Nursing Informatics Inventory – A Report of Existing Teaching and Learning Resources*
- *Palliative and End-of-Life Care Toolkit – An online teaching and learning resource to support undergraduate nursing education programs in Canada*
- *Palliative and End-of-Life Care: A Faculty Guide for Nursing Education – A teaching and learning resource based on a pedagogical model: Story-based learning*
- *“A Story About Care” video*
- *Nursing Informatics – Entry-to-Practice Competencies for Registered Nurses*
- *Palliative and End-of-Life Care Entry-to-Practice Competencies and Indicators for Registered Nurses*
- *CASN Position Statement on Baccalaureate Education.*
- *CASN Position Statement on the Education of Registered Nurses in Canada*
- *CASN Position Statement on Master’s Level of Nursing*
- *CASN Position Statement on Doctoral Education in Nursing in Canada*
- *CASN Position Statement on Proposed New Entry-to-Practice Nursing Exam*



PUBLICATIONS PHARES



- *Formation de Maîtrise en sciences infirmières au Canada: Rapport final 2012*
- *Cadre national de principes directeurs et éléments essentiels pour la formation des infirmières et infirmiers praticiens du Canada est terminé*
- *Cadre pancanadien des principes directeurs et des éléments essentiels aux programmes de transition pour les infirmières et infirmiers à l'étranger*
- *Cadre pancanadien des principes directeurs et des éléments essentiels aux programmes de transition pour les infirmières et infirmiers à l'étranger : Rapport*
- *Cadre pancanadien des principes directeurs et des éléments essentiels aux programmes de transition pour les infirmières et infirmiers formés à l'étranger : Guide d'auto-évaluation des programmes de transition*
- *Répertoire des ressources en informatique infirmière de l'ACESI : Rapport sur les ressources existantes en enseignement et en apprentissage*
- *Soins palliatifs et soins fin de vie – compétences et indicateurs pour l'admissibilité à la pratique en soins palliatifs et de soins en fin de vie pour les infirmières*
- *Analyse de l'environnement d'enseignement et d'apprentissage des soins palliatifs et de fin de vie*
- *Trousse d'outils pour les soins palliatifs et de fin de vie - Outils en ligne pour l'enseignement et l'apprentissage dans les programmes d'études de premier cycle en sciences infirmières du Canada*
- *Soins Palliatifs et de fin de vie : Guide du formateur en sciences infirmières - Une ressource d'enseignement et d'apprentissage fondée sur le modèle pédagogique de l'apprentissage par la narration d'histoires*
- *Soins Palliatifs et de fin de vie : Guide du formateur en sciences infirmières - l'apprentissage par la narration d'histoires - PowerPoint*
- *Compétences en informatique infirmière requises par les infirmières autorisées pour accéder à la pratique*
- *Énoncés de politiques de l'ACESI sur la formation des infirmières et infirmiers autorisés au Canada*
- *Énoncé de politique de l'ACESI sur Formation au baccalauréat et programmes de baccalauréat*
- *Énoncé de politique de l'ACESI sur les études de maîtrise en sciences infirmières*
- *Énoncé de politique de l'ACESI sur les études doctorales en sciences infirmières au Canada*
- *Énoncé de politique sur la nouvelle proposition d'examen d'entrée dans la profession infirmière*

STRATEGIC PLAN
JANUARY 2009 — JANUARY 2014
STATUS UPDATE
NOVEMBER 2012

PLAN STRATÉGIQUE
JANVIER 2009 - JANVIER 2014
MISE À JOUR
NOVEMBRE 2012

Outcomes	Outputs	Timeline	Status / Progress Report
Strategic Priority A: Advance and unify CASN's voice for nursing education leadership, partnership and policy Priorité A : Promouvoir le rôle de l'ACESI à titre de porte parole unique à l'égard du leadership, des partenariats et des politiques en enseignement des sciences infirmières			
Outcome #1 Stakeholders seek input from CASN when making decisions dealing with issues or policies impacting nursing education and research Résultat 1 Les parties intéressées qui s'occupent de questions d'intérêt relativement à l'enseignement et à la recherche en sciences infirmières ou de politiques connexes consultent l'ACESI avant de prendre des décisions	1.1 Explore, identify and influence decision making processes 1.1 Recenser et étudier les processus décisionnels et exercer sur eux une influence	Ongoing	CASN Board members and national office staff participated in numerous international and national meetings and projects in order to advocate for nursing education both nationally and internationally. Activities included in the list below represent just some of the actions carried out in order to ensure that this outcome is realized. <u>International Activities</u> - Provided the secretariat for GANES and participated actively in GANES. - Partnership with Cowater International and McMaster University in CIDA nursing education development project in Bangladesh. - Providing administrative support to GANES in planning the GANES post conference workshop in Melbourne May 2013. - Invitation accepted by the Executive Director to be Keynote speaker at 5th International Nursing Conference in Kuwait Nov 27-29, 2012 (on accreditation). <u>National Projects</u> - Project funded by Health Canada with multiple stakeholder participation (ongoing): National Project to <i>Transfer the Knowledge Required in order to Integrate Cultural Competence and Cultural Safety into Undergraduate Nursing Education Programs</i> (January 2012-ongoing) - Project funded by Canada Health Infoway with multiple

			stakeholder participation (ongoing): <i>Generating Momentum to Prepare Nursing Graduates for the Electronic World of Healthcare Delivery.</i> ▪ Proposal submitted to the Public Health Agency of Canada (November 2011) to build on work of past projects and to generate updated entry-to-practice nursing specific public health competencies (pending). ▪ Development of <i>A National Framework to Guide Nurse Practitioner Education in Canada</i> with multiple stakeholder involvement in the process (Completed October 2012). <u>Partnerships with National Organizations</u> ▪ Partner of CNA in the creation, dissemination and analysis of the annual Student and Faculty Survey. ▪ Participant in Advocacy Partnership led by CNA of national nursing organizations – ongoing. ▪ Partnered with Aboriginal Nurses Association of Canada (A.N.A.C) in the development, distribution and analysis of the Cultural Competence and Cultural Safety survey to CASN member schools. ▪ Executive Director an advisory member of the CNSA Board; CASN Corporate Services provides administrative support. ▪ Partnered with A.N.A.C., Assembly of First Nations (AFN) and Inuit Tapiriit Kanatami (ITK) on a knowledge translation project to promote the integration of concepts of, and related to cultural competence and cultural safety. ▪ Partnered with CNA, CNF, ACEN, and CANR to form the Nursing Research Consortium – CASN was the secretariat until September 2012. ▪ Partnered with Canadian Virtual Hospice to create an educational resource in the area of Palliative and End-of-Life Care. ▪ Partnered with Canadian Patient Safety Institute to identify links in accreditation standards and patient safety competencies. ▪ Partnered with COUPN and CAATs to hold the CASN Nursing Research Conference, May 7th - 10th, 2012 in Toronto. ▪ Working with collaborative partners in British Columbia to plan the 2013 Nurse Educators Conference, June 2013 in Vancouver. ▪ Partnered with eight, health professional education Accreditation organizations in a CIHR funded meeting
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			grant regarding the assessment of IPE in accreditation standards (Meeting held September 2012, Vancouver). CASN actively participated in /was represented at the following stakeholder meetings/projects: ▪ Global Nursing Leadership Reference Group ▪ AIPHE (Accreditation of Interprofessional Health Education) Steering Committee ▪ Nursing Reference Group (Canada Health Infoway) ▪ Health Canada Task Force on Internationally Educated Nurses ▪ Association of Accrediting Agencies of Canada (AAAC) meetings ▪ Canada Health Infoway Clinical Peer Network Symposium ▪ Think Tank on the Effective Workforce Integration of Internationally Educated Nurses ▪ CIFI Advisory Committee ▪ IEN Stakeholder Forum ▪ IEN Educators Conference ▪ CRUDEM Accreditation Face-to-Face meeting ▪ CRNE National Response Teleconference ▪ Advisory Task Force on Cultural Competence and Cultural Safety meetings ▪ CNSA Board of Directors Meeting and National Conference ▪ CFNU National Discussion on Continuing Care ▪ CCNE Teleconference ▪ PHAC Teleconferences ▪ Information and Communication Technology Council of Canada ▪ Nurse Practitioner Education in Ontario - Knowledge Translation In-Person Meeting ▪ A.N.A.C. Evaluation Team In-Person Meeting re. Cultural Competence and Cultural Safety Summary Report and Journal Article Publication ▪ E-health 2012 ▪ NECBC (Nurse Educators Conference) ▪ Meeting organized by the Ordre des infirmières et infirmiers du Québec announcing degree as entry-to-practice plan ▪ CNA Biennial Convention ▪ CNIA Spotlight on Nursing Informatics ▪ CSAE Governance Summit 2012 ▪ International Nursing Informatics Conference 2012 (collaborative presentation with Association of Faculties of Medicine, Association of Schools of Pharmacy, Infoway)
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			▪ CASN-Infoway National Stakeholder Forum ▪ Foreign Qualification Recognition Working Group meeting ▪ ARCASN Research Conference Presentation: Development of a National Framework of Guiding Principles and Essential Components for Nurse Practitioner Education (June 2012)
	1.2 Participate in, and shape decisions affecting nursing education 1.2 Être partie aux décisions visant l'enseignement des sciences infirmières et aider à les mettre au point	Ongoing	▪ Aboriginal Health Human Resource Initiative funding obtained for a National Project to <i>Transfer the Knowledge Required to Integrate Cultural Competence and Cultural Safety into Undergraduate Nursing Education Programs</i>. ▪ CASN commentary on NP and Clinical Nurse Specialist education published in a peer reviewed journal. ▪ Two articles published in a peer reviewed journal on CASN projects promoting quality education. ▪ A Palliative and End-of-Life Care National Stakeholder Symposium was held in February 2012 as part of the palliative care project. ▪ A Stakeholder Forum on IEN Education was held in February 2012 as part of the IEN education project. ▪ A Stakeholder Symposium was held late November 2011 as part of the Canada Health Infoway funded project. ▪ A literature review was completed of existing nursing informatics competencies to support the development of entry-to-practice RN informatics competencies and it was posted on the CASN website. ▪ The <i>Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs</i> was created and widely distributed. ▪ A Self-Assessment Guide for IEN bridging programs was created to allow programs to compare their practices and policies against the essential components in the Pan-Canadian Framework. ▪ The Final Report on the Pan-Canadian Framework of Guiding Principles and Essential Components was created, containing information from the environmental scan and literature review of IEN bridging programs, and the other methodologies used to create the Framework. ▪ A position statement was developed in consultation with the Advocacy Committee regarding the decision to adopt a new entry-to-practice nursing exam by NCSBN. ▪ The CASN Advocacy Committee wrote the new National Council of Registered Nurses requesting that a committee be formed between the two organizations so that educators can have input into the development

			of the new registration exam. ▪ A Workshop on Scholarship was delivered to promote the development and/or enhancement of scholarship. ▪ National consensus-based Nursing Informatics Entry-to-Practice Competencies for Registered Nurses were developed and disseminated. ▪ An Inventory of Nursing Informatics Teaching and Learning Resources was developed and disseminated. ▪ A document comparing the CRNE and the NCLEX has been developed in light of the announcement that the provincial regulators has a contract with NCSBN to develop the 2015 entry-to-practice exam. ▪ Three Palliative and End-of-Life Care Nursing Teaching and Learning Resources were created : 1) “<i>A Story About Care</i>” video, 2) Online Toolkit, and 3) Story-based Learning Faculty Guide. ▪ A National Framework of Guiding Principles and Essential Components to Guide Nurse Practitioner Education in Canada has been developed. ▪ A Task Force on Nursing Master’s Education struck (July 2012) in response to a call from members for the need to examine the current state of these programs across the country, and the roles graduates of Masters programs are being prepared for. ▪ A Task Force on Clinical Placements was struck (July 2012) in response to a call from members for the need to identify innovative clinical approaches, due to the shortage of available clinical placements for nursing students. ▪ A Sub-Committee on Baccalaureate Education was created (July 2012) in response to a call from members for the need to engage in an annual dialogue about issues specific to Baccalaureate Education.
	1.3 Ensure budget/resource to support the work with stakeholders 1.3 Obtenir le budget et les ressources nécessaires au travail avec les parties intéressées	Ongoing	▪ The IEN Project funded by Health Canada was completed March 31, 2012 within the budget and timeframe. ▪ The Palliative and End-of-Life Care Project funded by Health Canada was completed March 31, 2012 within the budget and timeframe. ▪ Two and a half year funding obtained for Infoway project <i>Generating Momentum to Prepare Nursing Graduates for the Electronic World of Health Care Delivery - Engaging Stakeholders, Building Capacity, Mobilizing Curriculum Development</i> (ongoing) is within budget and the proposed timeframe. ▪ 2 year funding obtained from the Aboriginal Health Human Resource Initiative for a. National Project to <i>Transfer the Knowledge Required in order to Integrate Cultural Competence and Cultural Safety into Undergraduate Nursing</i>

			<i>Education Programs</i> is progressing within budget and the proposed time frame. ▪ Funding proposal submitted November 2011 for second part of Public Health project (pending).
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Outcome #2 Schools and stakeholders access a bilingual, national repository of relevant and current information/data (clearinghouse) Résultat 2 Les écoles et les parties intéressées ont accès à un référentiel pancanadien bilingue d'information et de données récentes et pertinentes (centre de documentation)	2.1 Develop position/policy statements bilingually and disseminate to the internal and external stakeholders 2.1 Préparer des énoncés de position et de politique dans les deux langues officielles et les diffuser aux parties intéressées aussi bien internes qu'externes	Ongoing	CASN has worked hard to increase the quantity and quality of bilingual documents, products, and communications. This has included hiring and training of new translators, training of bilingual staff to edit documents, employment of francophone editors, and the development and implementation of internal quality control processes for translation. Some example of bilingual documents include: ▪ Bilingual creation of the CASN Position Statement on the Education of Registered Nurses in Canada. ▪ Bilingual creation of Proposed New Entry-to-Practice Nursing Exam position statement (December 2011). ▪ Bilingual creation of the Baccalaureate Position Statement (Approved by CASN Board of Directors November 2011). ▪ Bilingual report by the Standing Committee on Education re. Process for Responding to Educational Related Issues developed, and presented to the CASN Board of Directors (November 2011). ▪ Report on the Nursing Education in Canada Statistics 2010-2011 Registered Nurse Workforce, Canadian Production: Potential New Supply Report published and disseminated (November 2012). ▪ Bilingual report on a) Palliative and End-of-Life Entry-to-Practice Competencies b) Entry-to-Practice Nursing Competencies: ○ Palliative and End-of-Life Care Entry-to-Practice Competencies and Indicators for Registered Nurses/ Soins palliatifs et soins fin de vie – competencies et indicateurs pour l'admissibilité à la pratique en soins palliatifs et de soins en fin de vie pour les infirmières
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			○ Story-based Learning: A Faculty Guide for Nursing Education/ Soins Palliatifs et de fin de vie : Guide du formateur en sciences infirmières - Une ressource d'enseignement et d'apprentissage fondée sur le modèle pédagogique de l'apprentissage par la narration d'histoires ○ Story-based Learning: PowerPoint/ Soins Palliatifs et de fin de vie : Guide du formateur en sciences infirmières - l'apprentissage par la narration d'histoires - PowerPoint ○ Palliative and End-of-Life Care Toolkit / Trousse d'outils pour les soins palliatifs et de fin de vie - Outils en ligne pour l'enseignement et l'apprentissage dans les programmes d'études de premier cycle en sciences infirmières du Canada ○ Palliative and End-of-Life Care Toolkit: PowerPoint / Trousse d'outils pour les soins palliatifs et de fin de vie – PowerPoint ○ Environmental Scan: Palliative and End-Of-Life Care Teaching and Learning Resources/ Analyse de l'environnement d'enseignement et d'apprentissage des soins palliatifs et de fin de vie
	2.2 Compile, maintain and disseminate relevant, accurate, current information, promising practices 2.2 Recueillir, tenir à jour et diffuser de l'information pertinente, exacte et actuelle, notamment au sujet des pratiques prometteuses	Ongoing	CASN uses multiple methods to disseminate relevant and current information including its website, the newsletter, communications sent directly to member schools, forums, symposiums, conference presentations, and peer reviewed journals. Some examples include: ▪ The CASN website has been redesigned to improve dissemination of CASN documents. ▪ Articles on CASN projects (or projects CASN has contributed to) have been submitted to peer review journals – e.g. Cultural Competence and Cultural Safety A.N.A.C. Evaluation Team submitted a journal article for publication re. Evaluation of Cultural Competence and Cultural Safety in Canadian Schools of Nursing Project. ▪ Palliative and End-of-Life Care Entry-to-Practice Competencies and Indicators for Registered Nurses, and three Palliative and End-of-Life Care Nursing Teaching and Learning Resources (video, online toolkit, and story-based learning faculty guide) were disseminated at the Palliative and End-of-Life Care National Stakeholder Symposium (February 2012), posted to the CASN website, and distributed to CASN nursing member

			schools. ▪ Palliative and End-of-Life Care Inventory of Teaching and Learning Resources was posted to CASN website. ▪ Pan-Canadian Framework of Guiding Principles and Essential Components for IEN Bridging Programs and Self-Assessment Guide has been disseminated to all member schools and posted on the CASN website. ▪ CASN Environmental Scan of Nurse Practitioner Programs was disseminated at the CASN Graduate Studies and NP Educators' Forum (November, 2011). ▪ CASN Environmental Scan of Masters of Nursing Programs in Canada will be disseminated (November, 2012). ▪ Nursing Education in Canada Statistics 2010-2011 National Student and Faculty Survey published and disseminated to 135 Schools of Nursing (February 2012). ▪ Nursing Informatics Entry-to-Practice Competencies for Registered Nurses was disseminated to all member schools and posted on CASN website. ▪ Inventory of Nursing Informatics Teaching and Learning Resources developed and posted on CASN website. ▪ Advisory Task Force on Cultural Competence and Cultural Safety is developing a knowledge product related to cultural competence and cultural safety, to promote the integration of these concepts into nursing curricula which will be widely disseminated.
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Outcome #3 Regions contribute to and use CASN resources to address issues and opportunities and influence decisions in their jurisdictions Résultat 3 Les régions contribuent aux ressources de l'ACESI et y recourent pour étudier des questions, profiter d'occasions et influencer sur les décisions relatives à leur territoire	3.1 Compile, maintain and disseminate relevant, accurate, current information, promising practices 3.1 Recueillir, tenir à jour et diffuser de l'information pertinente, exacte et actuelle, notamment au sujet des pratiques prometteuses	Ongoing	▪ Publication with CNA of the Nursing Education in Canada Statistics 2010-2011 Registered Nurse Workforce, Canadian Production: Potential New Supply Report in February 2012. ▪ Publication with CNA of the Nursing Education in Canada Statistics 2010-2011 Registered Nurse Workforce, Canadian Production: Potential New Supply Report in September 2012. This document is a key resource for schools in regards to self-study and in terms of negotiating funding. ▪ Palliative and End-of-Life Care Entry-to-Practice Competencies and Indicators for Registered Nurses, and three Palliative and End-of-Life Care Teaching and Learning Resources (video, online toolkit, and story-based learning faculty guide) disseminated at the Palliative and End-of-Life Care National Stakeholder Symposium (February 2012), posted to the CASN website, and distributed to CASN nursing member schools. ▪ Palliative and End-of-Life Care Inventory of Teaching and Learning Resources posted to the CASN website. ▪ Nursing Informatics Entry-to-Practice Competencies for Registered Nurses published, disseminated to member schools, and posted on CASN website. ▪ Inventory of Nursing Informatics Teaching and Learning Resources posted to CASN website. ▪ Environmental Scan and Literature Review of best practices in IEN bridging programs completed to support the creation of the Pan-Canadian Framework of Guiding Principles and Essential Components. ▪ Pan-Canadian Framework of Guiding Principles and Essential Components and Self Assessment Guide disseminated to member schools and posted on CASN website. ▪ Environmental scan of teaching and learning resources in the area of nursing informatics for the CASN-Infoway project. ▪ CASN Environmental Scan of Nurse Practitioner programs disseminated at the CASN Graduate Studies Forum (November, 2011). ▪ Stakeholders across the country, including nursing faculty, students, and First Nations, Inuit, and Métis representatives met to discuss and advance the concepts of and related to cultural competence and cultural safety, at a knowledge translation symposium (March, 2012).
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	3.2 Provide clear, user-friendly communication mechanisms among regions, CASN, schools and individual faculty members 3.2 Fournir des mécanismes clairs et conviviaux de communication entre les régions, l'ACESI, les écoles et les membres du personnel enseignant	Ongoing	Multiple strategies have been used to provide clear, user friendly communications among regions, schools, and faculty. Examples include the following activities: ▪ CASN Website redesigned (September 2012). ▪ CASN provides online discussion forums for a variety of internal as well as external stakeholder groups. ▪ Palliative and End-of-Life Care Discussion Forum created (March, 2012). ▪ A monthly CASN News Update is published, incorporating information from stakeholders and members. ▪ CASN website provides space for membership to post news updates, announcements and requests. CASN also provides media updates as well as information regarding advocacy activities, on the website. ▪ The National Office uses Skype, Go-To-Meetings and Go-To-Webinars (web-conferencing), and teleconferencing to facilitate group meetings as well as individual communication. Exploration of possible options for including video communication during meetings, is underway. ▪ Work has been carried out to enhance the visual quality document design, and layout.
	3.3 Develop and provide bilingual tools for advocacy 3.3 Concevoir et fournir des outils de plaidoyer bilingues	Ongoing	▪ All CASN led documents being disseminated are published in both English and French.
	3.4 CASN encourages Regions to contribute to and use the national repository 3.4 Inciter les régions à contribuer au référentiel pancanadien et à le consulter	Ongoing	▪ Executive Director met with COUPN/CAATS in May 2012, and held a teleconference with regional affiliates.
	3.5 Revise the webpage and open a media section 3.5 Refondre le site Web et y créer une section destinée aux médias	Complete	▪ CASN Website was redesigned (September 2012). The new design highlights the strategic priorities of the Association. ▪ A bimonthly review of the website has been implemented. ▪ The media section improvements continue. ▪ CASN initiatives and projects are updated on the website. ▪ The list of accredited schools of nursing was revised to reflect the CASN Accreditation Program Framework of a separate accreditation decision for the Educational Unit and for each Nursing Education Program. ▪ CASN has developed a Facebook page that is linked with the CASN website to increase visibility.

Outcomes	Outputs	Timeline	Status / Progress Report
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Strategic Priority B – Guide excellence in nursing education through accreditation
Priorité B : Gérer l'excellence dans l'enseignement des sciences infirmières grâce à l'agrément

Outcome #1 Stakeholders recognize the CASN accreditation process as the approval mechanism for nursing education programs in Canada Résultat 1 Les parties intéressées reconnaissent dans le processus d'agrément de l'ACESI le mécanisme d'approbation des programmes canadiens d'enseignement des sciences infirmières	1.1 Identify key stakeholders and initiate conversations, eg., regulatory bodies, ACEN, CNA 1.1 Reconnaître les principales parties intéressées afin d'engager des échanges (p. ex., organismes de réglementation, ACEN, AIIC)	Medium	▪ A renewed Memorandum of Understanding (MOU) was signed for the joint program approval / accreditation agreement with the College of Registered Nurses of Nova Scotia and its schools of nursing. ▪ A CNO Regulatory body representative observes CASN Accreditation Bureau meetings when Ontario Schools are assessed. ▪ The terms of reference of the Advisory Committee on Accreditation Policy were revised to include a regulatory representative. ▪ A meeting with the Deans and Directors of the schools of nursing in Alberta was held to explore joint program approval and accreditation. ▪ RNABC and CASN have been comparing the CASN Accreditation Program and process with the approval process of RNABC.
	1.2 Provide a proposal/concept document that introduces the options, their importance, value-add and cost, so that it elicits a response 1.2 Fournir une proposition ou un document conceptuel exposant les possibilités, leur importance respective, leur valeur ajoutée et les coûts qui leur sont associés de manière à susciter des réactions	Medium	▪ Incorporated into the CASN Accreditation Program document.

Outcome #2 The accreditation process improves continuously Résultat 2 Le processus d'agrément s'améliore constamment	2.1 Continue to streamline processes (Task Force on Accreditation) 2.1 Continuer de rationaliser les processus (Groupe de travail sur l'agrément)	Ongoing	▪ There has been a concerted and continuous effort to streamline and improve Accreditation processes at all levels. ▪ The Advisory Committee on Accreditation Policy (ACAP) met regularly to develop processes and procedures to improve the CASN Accreditation Program. They have recommended minor changes to the accreditation program to improve it which
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			were adopted. - ACAP has held several focus groups to discuss the relationship of Educational Units and Educational Programs in Collaborative Partnerships with a view to proposing refined definitions to the CASN Accreditation Program, and to improving processes and procedures of reviews. - CASN Accreditation staff maintained a response rate to inquiries through e-mail and telephone of two business days, and administrative support to CAB to ensure decision letters were sent in less than one month following the CAB meeting. - Orientation/training courses have been provided for a) new Reviewers & b) new CAB members. - Accreditation forms have been developed to provide better information to schools and reviewers. - Guidelines have been developed to address requests/input from internal and external stakeholders/committees regarding nursing practice issues, research results and/or conceptual ideas. “Accreditation 101” program was developed and piloted to provide information to schools of nursing regarding the accreditation process. - The CASN Accreditation Program Manual has been reviewed, edited, and revised with a view to increasing its clarity and updating it where needed.
	2.2 Allocate resources to accreditation upgrading and renewal of computer support programs and systems 2.2 Attribuer des ressources à la mise à niveau et au remplacement des logiciels et du matériel informatique utilisés pour le processus d’agrément	Medium	- Mostly on-line operation maintained. - Confidential online discussion forum for CAB members maintained. - Continued to standardize accreditation decision letters and to develop e-mail templates in English and French to ensure clarity and consistency. - Orientation of new CAB members carried out using GoTo Meetings. - A streamlined and secure process utilized for filing, maintenance, and backup of accreditation documents.
	2.3 Explore “promising practices” 2.3 Examiner les pratiques prometteuses	Ongoing	- The Advisory Committee on Accreditation Policy (ACAP) continues to investigate and recommend promising practices for the continuous quality improvement of the CASN Accreditation Program. - Staff attended and contributed to the on-line discussions offered through the Association of

			Accrediting Agencies of Canada (AAAC) membership and twice-yearly meetings.
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Outcome #3 All current Canadian eligible programs in nursing have access to accreditation Résultat 3 En sciences infirmières, tous les programmes canadiens actuels admissibles ont accès à l'agrément	3.1 Delineate enablers and barriers to achieve outcome #3 3.1 Définir les agents de facilitation et les obstacles à l'atteinte du résultat 3	Complete	Completed 2010.
	3.2 Explore eligibility criteria for accreditation and look for opportunities to expand, including continuing education 3.2 Étudier les critères d'admissibilité à l'agrément et chercher des occasions d'étendre leur application, y compris à la formation continue	Medium	▪ A 1.5 hour "Accreditation 101" information session was offered to several schools and was received positively. ▪ Entry-to-Practice Master's of Nursing Programs are now eligible for an accreditation review as a university degree, entry-to-practice nursing program. ▪ A proposal is being developed to explore accreditation of IEN Bridging programs.
	3.3 Convene a table of key stakeholders, regulatory bodies to discuss: - a unified voice for the categories/groups of nursing education programs - a systemic view of nursing education - access to baccalaureate education 3.3 Réunir un groupe formé de personnes intéressées et de représentantes et représentants des principaux organismes de réglementation afin de discuter des sujets suivants : • porte parole unique pour les catégories et groupes de programmes d'enseignement des sciences infirmières • perspective systémique de l'enseignement des sciences infirmières accès à la formation universitaire de premier cycle	Medium	▪ Participated on a working group with AIPHE to integrate standards on IPE within the accreditation program. The standards are being discussed at various venues with recommendations from other groups. ▪ Held discussions with a RNABC working group.

Outcome #4 Other non-baccalaureate nursing programs in Canada may access accreditation Résultat 4 Les programmes canadiens de sciences infirmières ne menant pas à un baccalauréat peuvent obtenir l'agrément	4.1 Delineate issues and processes 4.1 Définir les enjeux et les processus	Long	See 3.2
	4.2 Explore eligibility criteria for accreditation and look for opportunities to expand 4.2 Examiner les critères d'admissibilité à l'agrément et trouver des moyens de les étendre	Long	See 3.2

Outcome #5 Up to three international nursing programs have access to accreditation Résultat 5 Jusqu'à trois programmes de sciences infirmières donnés à l'étranger peuvent obtenir l'agrément	5.1 Build on existing work done to explore opportunities 5.1 Tirer profit du travail déjà accompli afin d'envisager les possibilités	Ongoing	- University of Calgary-Qatar successfully completed an accreditation review. - University of Queensland has successfully completed an accreditation review. - A third international application for an accreditation review has been accepted and will be implemented pending travel advisory safety 2.
	5.2 Explore the development of a consultation service, provided by CASN, to get schools ready for an accreditation review 5.2 Examiner la possibilité de créer un service consultatif fourni par l'ACESI afin de préparer les écoles à leur examen d'agrément	Medium	National: - The webinar session, "Accreditation 101" assists schools to prepare for Accreditation. The schools response to this has been positive. International: - Consultation services to assist with the self-assessment preparations have been incorporated into the international accreditation review process.
	5.3 Explore the fit of international accreditation with the Canadian Registered Nurse Exam (CRNE) and Canadian regulatory bodies 5.3 Étudier comment l'agrément d'établissements à l'étranger pourrait cadrer avec l'Examen d'autorisation infirmière au Canada (EAIC) et les organismes de réglementation canadiens	Medium	Dialogue is underway with regulatory bodies.

Outcomes	Outputs	Timeline	Status / Progress Report
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Priority C: Strengthen the standards of excellence for nursing education through research and scholarship
Priorité C : Resserrer les normes d'excellence pour l'enseignement des sciences infirmières par l'entremise de la recherche et de l'avancement des connaissances

Outcome #1 A National Chair in nursing education is funded and established by 2011 Résultat 1 Une chaire de recherche en enseignement des sciences infirmières est créée et subventionnée au plus tard en 2011	1.1 Provide a framework for advocating for nursing education research. 1.1 Fournir un cadre de travail afin de plaider en faveur de la recherche en enseignement des sciences infirmières	Long	▪ A document examining the feasibility and providing a detailed plan for an online journal on the scholarship of teaching in nursing is in progress. ▪ A revised, signed Nursing Research Consortium has been created (MOU signed) and a Strategic Plan is being developed. ▪ Executive Director as representative of CASN sits on the Advisory Committee of the following research groups: ○ CIFI (Centre d'innovation en formation infirmière) at the University of Montreal. ○ RNAO National Nursing Best Practice Smoking Cessation Initiative. ○ Enhancing internationally educated nurses' language competencies: Fair and effective systems change through York University. ▪ The second annual CASN Dr. Pat L. Griffin Nursing Education Research Scholar has been selected and will open the first CASN Undergraduate Forum during the 2012 CASN Council meeting. The goal of this initiative is to support research in education, through inquiry, mentorship, and dissemination. ▪ CASN, as part of the Nursing Research Consortium, continues to participate in Research Canada.
	1.2 Explore and investigate fund development – persons, practices, successes 1.2 Chercher des moyens d'accroître les fonds affectés à la recherche – personnes, pratiques, réussites	Ongoing	▪ A Staff member is currently undergoing specialized training in fundraising practices and development.

	1.3 Talk to those who have been most influential in attracting chairs regarding successes, best practices 1.3 S'adresser aux personnes dont l'influence a contribué à l'établissement de chaires pour comprendre leurs facteurs de réussite et leurs pratiques exemplaires	Complete	
	1.4 Use GANES to identify research priorities to "frame" the research chair, e.g., international impact 1.4 Recourir à la GANES pour formuler des priorités de recherche permettant de « circonscrire » la chaire (p. ex., retombées sur la scène internationale)	Medium	As funding required for a Chair far exceeds the amount that has been collected such a discussion is still premature.

Outcome #2 Nursing education curriculum influences health system and practice re-design Résultat 2 Le programme d'enseignement en sciences infirmières influe sur la refonte du système et des pratiques de soins de santé	2.1 Follow up to the Nursing Education Summit 2.1 Assurer le suivi du Sommet sur l'enseignement des sciences infirmières	Complete	Completed August 2010.
	2.2 Reinforce a process where nursing research informs curriculum and accreditation standards (curriculum is more visionary than responsive); where possible develop indicators, Develop a process for integration of competencies (safety, informatics, palliative care, public health) into Accreditation 2.2 Mettre de l'avant un processus selon lequel les programmes d'enseignement et les normes d'agrément se fondent sur la recherche infirmière (le programme devient plus visionnaire que réactif) et, si possible, concevoir des indicateurs Élaborer un processus d'intégration des compétences (sécurité, informatique, soins palliatifs, santé publique) à l'agrément	Ongoing	- A process for assessing and integrating stakeholder input into CASN policies, position papers, and accreditation standards has been adopted and is being implemented. Thus, minor revisions to the key elements and interpretation of some accreditation standards resulted from stakeholder input on public health and palliative and end-of-life care. - The Advisory Committee on Accreditation Policy (ACAP) is examining how the Accreditation of Interprofessional Health Education standards that have been developed might be integrated into current CASN standards. - Partnered with Canadian Patient Safety Institute to identify links in accreditation standards and patient safety competencies.

Outcome #3 Key discoveries address important and emerging nursing practice and nursing education issues Résultat 3 Des découvertes majeures répondent à des questions prioritaires et nouvelles relativement à l'exercice de la profession infirmière et à l'enseignement des sciences infirmières	3.1 Transfer/disseminate existing work of the consortium (or related activities) that identifies research priorities	Complete	The Consortium received funding to develop a framework of key indicators of current and future research capacity and methodology, and has carried this out.
	3.1 Faire circuler et diffuser les travaux du regroupement (ou les activités connexes) qui déterminent des priorités de recherche 3.2 Use research priorities to establish framework for the research inventory clearinghouse 3.2 Se fonder sur les priorités de recherche pour définir le cadre d'un centre de documentation chargé de l'inventaire des travaux de recherche	Complete (consider updated mandate)	RESEARCH INVENTORY HAS BEEN INACTIVE SINCE THE DATA BASE FUNDING ENDED (APPROX. 7 YRS AGO).
	3.3 Research and Scholarship Committee analyzes consortium priorities and identifies implications/actions for nursing education in academic settings (think tanks, bold strategies for building and sustaining research and scholarship capacity, mentorship training models, tools to navigate the research and scholarship maze) 3.3 Faire analyser les priorités du regroupement par le Comité de la recherche et de l'avancement des connaissances afin de déterminer leurs retombées et les suivis à effectuer sur l'enseignement des sciences infirmières en milieu universitaire (laboratoires d'idées, stratégies audacieuses d'établissement et de maintien de la capacité de recherche, modèles de formation par le mentorat, outils de navigation dans le labyrinthe de la recherche)	Ongoing	- The CASN Research and Scholarship Committee contributes actively to the Nursing Research Consortium. - The second annual CASN Dr. Pat L. Griffin Nursing Education Research Scholar selection process has been carried out. The goal of this initiative is to support research in education, through inquiry, mentorship, and dissemination.

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

Outcome #1 Schools use promising practices and planning tools to optimize faculty recruitment, retention and development Résultat 1 Les écoles emploient des pratiques et des outils de planification prometteurs afin d'optimiser le recrutement, le maintien en poste et le perfectionnement professionnel du personnel enseignant	1.1 Develop a framework to optimize faculty recruitment, retention and development 1.1 Élaborer un cadre de travail afin d'optimiser le recrutement, le maintien en poste et le perfectionnement professionnel du personnel enseignant	Medium	- Analyses of the Student Faculty Survey Data have been conducted with resulting recommendations presented in the <i>"Registered Nurses Education in Canada Statistics, 2010-2011"</i>. - An Environmental Scan of Nursing Masters programs is being carried out with the goal of gaining greater clarity on the similarities and difference among these programs across the country.
	1.2 Collect what members have done to facilitate and optimize faculty recruitment, retention and development 1.2 Recenser les initiatives prises par les membres pour faciliter et optimiser le recrutement, le maintien en poste et le perfectionnement professionnel du personnel enseignant	Complete	The Student and Faculty Survey tracks not only the number of faculty retirement and attrition for other reasons but also asks that the schools identify what retention and recruitment issues they have. This data have been included in the final report for the past three years.
	1.3 Develop a list of promising strategies to optimize faculty recruitment, retention and development 1.3 Dresser une liste de stratégies prometteuses pour optimiser le recrutement, le maintien en poste et le perfectionnement professionnel du personnel enseignant	Medium	Pending
	1.4 Apply Health Human Resource modeling practices and research to build faculty capacity 1.4 Mettre en application les pratiques et les conclusions de recherche du modèle de ressources humaines en santé afin de renforcer les capacités du personnel enseignant	Long	Analysis of National Survey Data carried out with recommendations.

Outcome #2 Schools use CASN tools for addressing student retention Résultat 2 Les écoles utilisent les outils de l'ACESI afin de préserver leur effectif étudiant	2.1 Develop a tool/framework for Schools of Nursing to use individually to analyze retention/attrition issues 2.1 Concevoir un outil ou un cadre de travail que chaque école de sciences infirmières peut utiliser pour analyser sa situation à l'égard de la préservation ou de la déperdition de son effectif scolaire	Complete (Phase 2 being discussed)	- This tool was developed (2007). - A discussion with CNA regarding the feasibility of measuring attrition was examined.
	2.2 Provide a framework to analyze nursing retention issues in the larger post-secondary education context 2.2 Fournir un cadre de travail afin d'analyser les questions de préservation des effectifs en sciences infirmières dans le contexte plus vaste de l'éducation postsecondaire	Long	PENDING

Outcome #3 Schools contribute to and access CASN's repository of promising practices and funding strategies Résultat 3 Les écoles alimentent et consultent le référentiel de l'ACESI sur les pratiques prometteuses et les stratégies de financement	3.1 CASN articulates the cost of nursing education in fiscal terms 3.1 Exposer le coût de la formation infirmière dans une perspective financière	Completed	Complete
	3.2 Identify the resources needed to move forward the Canadian Nursing Education agenda 3.2 Déterminer les ressources nécessaires pour faire progresser le dossier de l'enseignement des sciences infirmières au Canada	Completed	Complete-White Paper.
	3.3 Secure funding to explore education resources allocation 3.3 Obtenir du financement afin d'examiner la répartition des ressources en éducation	Completed	Complete-White Paper.

	3.4 Determine the cost of educating a baccalaureate prepared registered nurse 3.4 Établir ce que coûte la formation d'une infirmière autorisée bachelière	Long	See 3.1
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Glossary
ACEN = Academy of Canadian Executive Nurses
CARNA = College & Association of Registered Nurses of Alberta
CASN = Canadian Association of Schools of Nursing
CNA = Canadian Nurses Association
NANB = Nurses Association of New Brunswick
NEPAB = Nurses Education Program Approval Board
SRNA = Saskatchewan Registered Nurses' Association
WHO = World Health Organization
WRCASN = Western Region CASN

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

ARCASN PRESIDENT'S REPORT 2011 - 2012

ARCASN's executive met three times this past year. The first meeting was in June at the AGM held in Antigonish, NS. On September 30, we had a one day meeting at Dalhousie University in Halifax, NS and on February 21, 2012 the executive met via teleconference.

The 2012 Nursing Research Conference, *Professional Nursing Presence: Setting Priorities for the Health of Nursing* was held at Dalhousie University, Halifax, NS, June 21-23, 2012. The keynote speaker was Dr Judy Boychuk Duchscher from the University of Calgary, Faculty of Nursing who spoke on ED-Nursing the Future. A Panel Discussion was held addressing current trends in nursing practice priorities with representatives from government, CRNNS, academia, research, and practice. Special thanks to Cathy Sheffer, ARCASN Conference Chair, and her team for an excellent job.

ARCASN's President, Creina Twomey, participated at the CASN Board of Directors meeting, held at the Hilton Lac Lemay, Gatineau, Québec. Evelyn Kennedy, Associate Professor and Associate Dean of the Cape Breton University Nursing, Sydney, Nova Scotia and Dr Judith McFetridge-Durdle, Dean of Memorial University School of Nursing were elected to the CASN board as representatives for the Atlantic Region.

ARCASN's executive continues to pursue the activities outlined in our strategic plan. We continue to meet our mission and reflect the changing needs in our region. ARCASN continues to work hard at improving communication with our membership by producing a concise annual newsletter. This effort would not be possible without Pearl Herbert, our editor. The 2012 newsletter can be found on our web site.

**To celebrate excellence in nursing education and nursing research
ARCASN was "pleased to acknowledge the following 2012 award recipients.**

Education Innovation Awards:

- 1) Loretta Secco, Donna Bulman, Kathy Wilson, & Kelly Day (UNB – Fredericton)
"A faculty development pilot to implement virtual clinical excursion in a maternity clinical course"
- 2) Willena Nemeth, Debbie Brennick, & Claudette Taylor (CBU – Sydney)
"An exploration into the challenges of a computerized rn exam on nursing education evaluation methods: A change from traditional to technical"

Research Awards:

- 1) Krista Wilkins (University of New Brunswick)
"Nursing students use photographs to capture the self in caring relationships"
- 2) Megan Aston (Dalhousie University)
"Canadian-Tanzanian partnership: Exploring the strengths and challenges of maternal-child health in Tanzania."

The Executive members for 2012-2013 include:

Incoming President: Audrey Walsh, Cape Breton University

Incoming President Elect: Cyndee MacPhee, Cape Breton University;

Returning Treasurer: Glenda Cuning, Western Region School of Nursing;

Incoming Secretary: Sandee Hicks-Moore; University of New Brunswick

Respectfully submitted,

Audrey Walsh

RAPPORT DE L'ACÉSI-RQ - 2011-2012

1. INSTANCES DE GOUVERNE :

En 2011-2012, l'Assemblée générale annuelle s'est tenue le 25 octobre 2011. Les membres du Conseil d'administration de l'ACÉSI-RQ se sont rencontrés deux fois, soit le 25 octobre 2011, dans le cadre du Congrès annuel de l'Ordre des infirmières et infirmiers du Québec (OIIQ) à Montréal, et le 29 août 2012. Les membres du comité exécutif se sont réunis le 26 septembre et le 5 décembre 2011 ainsi que le 30 avril 2012.

Membre du comité exécutif 2011-2012

- Johanne Goudreau, Université de Montréal, présidente
- Chantal St-Pierre, Université du Québec en Outaouais, vice-présidente
- Linda Lepage, Université Laval, secrétaire
- Françoise Filion, Université McGill, trésorière
- Luc Mathieu, conseiller

2. RAPPORT ANNUEL 2011-2012

En 2011-2012, les travaux de l'ACÉSI-RQ ont été concentrés autour des objectifs suivants :

- Assurer le suivi du dossier des bourses pour la formation de la relève du corps professoral des universités québécoises. Des données ont été collectées sur les retombées du programme de bourses du MELS. Des représentations ont été faites régulièrement à la Table de la CREPUQ qui est mandatée pour assurer le renouvellement du programme de bourses au MELS.
- Assurer un meilleur partenariat avec le MSSS et l'OIIQ relativement au déploiement des programmes IPS. Des représentations ont été faites régulièrement à la Table sectorielle nationale en sciences infirmières des RUIS.
- Mettre en place les conditions de réalisation de la formation de l'infirmière clinicienne en soins spécialisés, de l'infirmière praticienne et de l'infirmière cadre-conseil. Le Forum sur la pratique avancée recueille depuis un an les renseignements lui permettant d'exercer des actions politiques favorisant le développement du rôle de ces professionnels.

- Identifier des stratégies de renforcement du caractère intégré de la formation infirmière intégrée FII (dec-bac). Les résultats du projet de recherche pour évaluer la nature intégrée du programme ne sont pas encore disponibles. Le Forum FII attend ces résultats pour procéder aux travaux d'ajustements des programmes en vue du passage au baccalauréat pour une première cohorte potentielle en 2014-2019.
- Identifier des stratégies et plaidoyers à développer pour participer de façon stratégique à la valorisation et au développement de la recherche et de son financement. Cette année, les chercheurs en sciences infirmières du Québec ont collaboré tous ensemble pour la création d'un Réseau québécois de recherche en sciences infirmières.
- Le 26 septembre 2011, l'ACÉSI-RQ a été invitée par l'OIIQ à une discussion concernant les capacités d'accueil des universités advenant que le baccalauréat devienne le niveau d'accès au droit de pratique au Québec en 2014.
- Au cours de l'année il y a eu plusieurs échanges entre l'OIIQ, le MSSS et l'ACÉSI-RQ concernant
 - La nouvelle norme de formation continue pour les infirmières (l'attribution des UFC)
 - Le cheminement académique des infirmières diplômées en France avant l'accord franco-québécois sur la mobilité de la main-d'œuvre en 2012.

La présidente de l'ACÉSI-RQ 2011-2012,

Johanne Goudreau

COUPN-CAATS REPORT 2011-2012

Background

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

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

Actions Taken

- The past year has been a particularly active one. COUPN and CAATS continue to meet at least twice per year and pursue actions surrounding our common issues. This has included:
 - The development of a work group on clinical education with the Joint Provincial Nursing Committee, a committee of key Ontario nursing stakeholder organizations and the Ministry of Health and Long-Term Care (MOHLTC), whose role is to advise the Minister and the Deputy-Minister about, and contribute to, health policy from a nursing perspective and support communication among nursing groups and the government. The work group held its first meeting in August. Its mandate is to develop recommendations regarding how to align nurse education program enrolment with health human resource needs, and how to develop the clinical education system in a manner that addresses patient needs across the continuum of care, interprofessional care, and the overall shortage of clinical placements.
 - Participation on CASN's new Task Force on Clinical Education.
 - Co-hosting the CASN research conference in downtown Toronto in May.
 - The formation of two work groups with the Chief Nursing Executive Committee of the Academic Hospitals of Ontario—one on developing a best practice guideline on integrating new nurses into practice, and the second on developing curriculum around aging.
 - A meeting with College of Nurses of Ontario senior staff to outline our concerns regarding their agreement to partner with the National Council of State Boards of Nursing to develop a North American-wide RN licensing exam.

- A joint letter to the Council of the College of Nurses of Ontario outlining our concerns regarding the proposed new RN exam.
 - Other joint meetings with stakeholders including the Ministry of Health and Long-term Care to discuss clinical education, and the Registered Nurses Association of Ontario (RNAO) to discuss Best Practice Guidelines and other areas of joint interest.
 - Participation on a new "Tri-Partite Committee" between the Ministry of Training, Colleges and Universities, the Ministry of Health and Long-term Care, Colleges Ontario, and the Council of Ontario Universities, to examine whether colleges and a greater number of universities should offer stand-alone nursing degrees. One meeting was held in July to discuss government parameters of the discussion and what information may need to be collected for government to make an informed decision on this issue.
- As part of its annual retreat, COUPN held a half-day "Summit on the Future of Nursing at the Front Line of Care" in January, with 14 nursing stakeholder representatives in attendance. Many interesting ideas were discussed, including expanding the role of RNs as the first point of contact with the healthcare system. COUPN members spent a follow-up half day discussing the implications of the summit for the future of university nursing education. A follow-up summit with student representatives from the 14 university nursing schools is being held in Sept. A discussion paper is being developed based on the two summits.
 - Always a highlight, the fifth annual COUPN Awards were held in Toronto in April, to celebrate excellence in nursing education and scholarship. Nine awards were distributed.

COUPN CAATS Executive Committee 2011-12

CAATS Executive Members

Ellen Bull, Centennial College
Sandra DeLuca, Fanshawe College
(CAATS Co-Chair)
Marilyn King, Sault College
Maria May, Seneca College

COUPN Executive Members

Jennifer Medves, Queen's University
Linda Patrick, University of Western Ontario
Karen Poole, Lakehead University
Catherine Tompkins, McMaster University (COUPN Co-chair)

WESTERN NORTH-WESTERN REGION REPORT 2011-2012

Background

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

Actions Taken

Annual General Meeting

WNRCSN has an annual Nurse Educators Conference that includes the Annual General Meeting in February. The 2012 conference was hosted by University of Lethbridge, Faculty of Health Sciences. The conference theme was “Winds of change: Diversity and Divergence”. To encourage attendance at the AGM, rather than scheduling the AGM at the end of the conference, the AGM was held on the last day of the conference during the breakfast hour. Consequently, the meeting was very well attended. The main focus of discussion was the changes to the national RN examination. Members expressed their concerns and provided the WNRCSN executive with direction regarding following up on their concerns. There was also discussion regarding on-line registration and the website. Last, fee structure was discussed with a motion to increase the annual registration fees.

RN examination

As per WNRCSN membership instruction to develop a position statement, executive members gathered further information regarding the implementation of the new RN exam within the western provinces. After gathering information, the executive met to discuss the development of a position statement. Since undergraduate nursing education is under the auspices of the provincial government, as an organization representing western provinces and northern territories, the executive determined that little could be done other than to voice our concerns on behalf of our constituents when appropriate opportunities presented themselves.

Online registration and website

One hundred and ninety-two people registered online this year. This is up from the previous year. MALs will need to continue to work hard to encourage membership. The executive and MALs will be working on making the website more interactive for its members.

Registration fees

An increase in the annual registration fees from \$30.00 to \$50.00/year was suggested and met with little opposition. The motion will be brought to the AGM next year.

Annual Awards

Awards were presented as follows:

- *Graduate Student Research Award*: Sheena Simpkins, University of Lethbridge
- *Education Research Award*: Darlene Pankratz, Trinity Western University
- *Education Innovation Award*: Nicole Brown & Sue Blakeway, Selkirk College

Honorary Membership

Norma Wilderman from Saskatchewan received the Honorary Membership this year. Norma has been a nurse educator for more than 30 years all the while being a strong proponent of WNRCSN through her leadership.

Next Steps

We are continuing to develop our communication network among the member schools in WNRCSN and encouraging debate on nursing education issues in Canada. We will continue to work toward having representation from every eligible school in the Western and North-western Region. We are also challenged with securing volunteers for executive and MAL positions. The current executive will be working on recruitment strategies to support these positions as well as to enhance membership.

Executive Committee 2012 - 2013

Donna Petri, Thompson Rivers University – Past-President
Monique Sedgwick, University of Lethbridge, Vice-President
Katherine Haight, University of Lethbridge, Secretary-Treasurer
Nicole Harder, University of Manitoba
Kristine Metcalfe, Red River College
Beverly Williams, University of Alberta
Pertice Moffitt, Aurora College
Nicole Brown, Selkirk College
Chris Barlow, Nursing Education Program of Saskatchewan

CNSA REPORT 2011-2012

The Canadian Nursing Students' Association (CNSA) is the national voice of nursing students, representing over 25,000 students from coast to coast. Last year, we saw a significant increase in membership, particularly in the West region, making CNSA truly representative of our constituents. CNSA is continuing to grow and expand its voice through advocacy efforts and increased stakeholder relations. Our 2012 National Conference, held in Saskatoon, was an overwhelming success, and we were thrilled to see over 500 nursing students collaborating on important nursing issues and topics. Our 2012-13 Board of Directors was elected at our National Conference, and consists of the following individuals:

President	<i>Maggie Danko, University of Alberta</i>	Vice-President	<i>Lise Schultz, University of Saskatchewan</i>
Director of Communications	<i>Laura Gallant, UOIT</i>	Director of Membership Services	<i>Emilie Hay, McMaster University</i>
Director of Bilingualism and Translation	<i>Jeremy Roy-Leger, Université de Moncton</i>	Director of International Health	<i>Amanda Schneider, University of Regina</i>
Director of Career & Leadership Development	<i>Indrah Kerrison, University of Lethbridge</i>	National Conference Director	<i>Sonja MacDonald, Dalhousie University</i>
Atlantic Regional Director	<i>Leslie Brown, Memorial University</i>	Québec Regional Director	<i>Vanessa Lauzon, McGill University</i>
Ontario Regional Director	<i>Carly Whitmore, Trent University</i>	Prairies Regional Director	<i>Ashton Kaczur, University of Saskatchewan</i>
Western Regional Director	<i>Abby Wiens, UNBC, Terrace</i>	Past President	<i>Evan Jolicoeur</i>
Administrative Officer	<i>Andrea Pinsent-Martineau</i>	CASN Representative	<i>Cynthia Baker</i>

CNSA is looking forward to an exciting and busy year. This year is significant, as we are implementing a membership fee increase as mandated by our National Assembly. In anticipation of this change, we have struck a committee to work on the logistics of implementation. For chapter schools that must fundraise their membership fees, this could be a significant challenge, thus our committee is dedicated to ensuring the fee increase is not a barrier to membership. We also have created a committee dedicated to advocacy efforts around the changes to the Entry-to-Practice Examination. The members of this committee are drafting CNSA's official position statement, and will be corresponding with all stakeholders who are affected by these changes.

CNSA is in the midst of a rebranding campaign. We are in the process of updating and redesigning our website, and are moving forward in designing a new logo that represents our association. We are also working on engaging our membership, through social media, increased contact and advocacy, and more. Another priority for CNSA this year has been the advancement of nursing research. Two of our regional conferences will include student research symposiums. As well, CNSA presented a resolution on Nursing Informatics at the CNA AGM, which was passed by CNA's membership. This was a very exciting first step for CNSA in expanding our voice, and being recognized within the national nursing community.

Our four regional conferences will be hosted from coast to coast throughout the fall, by Langara College in Vancouver, Ryerson University in Toronto, McGill University in Montreal, and Memorial University in St. John's. From January 23 – 26, 2013, Dalhousie University will host our Annual National Conference in Halifax. This year's theme is "Cultivating Passion, Motivating Action." We can't wait for the exceptional line up of speakers, workshops, and networking events that will inspire nursing students to enact this theme.

BOARD OF DIRECTORS 2011-2012

CONSEIL D'ADMINISTRATION 2011-2012

President	Clémence Dallaire Université Laval	Présidente
President-Elect	Linda Ferguson University of Saskatchewan	Présidente-désignée
Treasurer	Stephen Bishop Camosun College	Trésorière
Directors - Western Schools	Denise Bowen Aurora College Carol Ewashen University of Calgary Beverly Williams University of Alberta	Administratrices - Région de l'ouest
Directors - Ontario Schools	Sandra DeLuca Fanshawe College Kirsten Woodend Trent University Sioban Nelson University of Toronto	Administratrices Région de l'Ontario
Directors - Quebec Schools	Johanne Goudreau Université de Montréal Jacinthe Pepin Université de Montréal	Administratrices Région du Québec
Directors - Atlantic Schools	Evelyn Kennedy Cape Breton University Judith McFetridge-Durdle Memorial University of Newfoundland	Administratrices Région de l'atlantique
Public Representative	Kathryn Munn Mediator, Munn Conflict Resolution Services	Représentante du public
Student Representative	Lise Schultz Vice-President, Canadian Nursing Students Association (CNSA)	Représentant des étudiant(e)s
Accreditation Bureau Chair	Pauline Paul University of Alberta	Représentante du Bureau d'Agrément

COMMITTEE MEMBERS 2011-2012

Audit Committee / Comité d'audit

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

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

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

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

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

Standing Committee on Education/Comité permanent, Éducation

Jacinthe Pepin, Université de Montréal (Co-Chair), QC
 Kristen Woodend, University of Ottawa (Co-Chair), ON
 Landa Terblanche, Trinity Western University, BC
 Linda Patrick, University of Windsor, ON
 Margaret Purden, McGill University
 Esther Sangster-Gormley, University of Victoria (SCGS), BC
 Carol Ewashen, University of Calgary (SCGS), AB
 CASN President (Ex-officio)
 CASN Executive Director (Ex-officio)
 CASN Staff liaison

MEMBRES DES COMITÉS 2011-2012

CASN Accreditation Bureau (CAB) / Bureau d'agrément

Pauline Paul, University of Alberta (Faculty Rep - Bilingual) (Co-Chair)
 Molly Westland, Fleming College (Faculty Rep) (Co-Chair)
 Janet Landeen, McMaster University (Faculty Rep)
 Cécile Michaud, Université de Sherbrooke (Faculty Rep – Bilingual)
 Thérèse Antoun, Montfort Hospital (CNA Service Agency Rep – Bilingual)
 Rita Caldwell, Dalhousie University (AUCC Academic Rep)
 Christopher Rutherford, Low Murchison Radnoff LLP (Community Rep)
 Erin Bruce, College of Nurses of Ontario (CNO Observer)
 CASN Staff liaisons

CASN Advisory Committee on Accreditation Policy (ACAP)

Madeleine Buck, McGill University (Co-Chair)
 Lois Berry, University of Saskatchewan (Co-Chair)
 Ellen MacFarlane, St. Francis Xavier University (Faculty Rep)
 Carole Orchard, University of Western Ontario (Faculty Rep)
 Betty Cragg, University of Ottawa (Faculty Rep)
 Johanne Goudreau, Université de Montréal (Board Liaison)
 Kirsten Woodend, Trent University (Education Rep)
 Margaret Kennedy Royal College of Physicians (External Rep)

Sub-Committee on Graduate Studies/

Forum, Deuxième Cycle

Esther Sangster-Gormley, University of Victoria (Co-Chair)
 Margaret Purden, McGill University (Co-Chair)
 Carol Ewashen, University of Calgary (Board Liaison)
 CASN Staff liaison

CASN Task Force on Nurse Practitioner Education

Ruth Martin-Misener (Co-Chair), Dalhousie University
Eric Staples (Co-Chair), McMaster University
Mary Ellen Andrews, University of Saskatchewan
Marilyn Ballantyne, McMaster University
Donna Best, Memorial University
Joyce Bruce, Saskatchewan Institute of Applied Science and Technology (SIAST)
Louise Bujold, Université Laval
Kristina Chapman, IWK Health Centre
Faith Donald, Ryerson University
Carol Ewashen, CASN Board of Directors, University of Calgary
Karen Graham, Aurora College
Kathleen Hunter, University of Alberta
Rosanne Jabbour, College of Nurses of Ontario
Judith McFetridge Durdle, CASN Board of Directors, Memorial University
Monica Parry, University of Toronto
Paula Prendergast, College of Registered Nurses of Nova Scotia
Christine Patterson, McMaster University
Josette Roussel, Canadian Nurses Association
Esther Sangster-Gormley, University of Victoria
Lynnette Leeseberg Stamler, University of Saskatchewan
CASN President
CASN Executive Director
CASN Staff liaison

CASN Sub-Committee on Baccalaureate Education

Linda Patrick (Chair), University of Windsor
Cathy Graham, Trent/Fleming School of Nursing
Kaysi Kushner, University of Alberta
Jennie Miron, University of New Brunswick-Humber Collaborative Program
Kathy O'Flynn-Magee, University of British Columbia
Caroline Porr, Memorial University
Lynne Young, University of Victoria
CASN President
CASN Executive Director
CASN Staff liaison

CASN Task Force on Nursing Master's Education

Carol Ewashen (Co-chair), University of Calgary, CASN Board of Directors
Margaret Purden (Co-chair), McGill University
Sandra Bassendowski, University of Saskatchewan
Geertje Boschma, University of British Columbia
Chantal Cara, Université de Montréal
Alba DiCenso, McMaster University
Mary Ellen Gurnham, Canadian Nurses Association
Marilyn Macdonald, Dalhousie University
Caroline Park, Athabasca University
Sheryl Reimer-Kirkham, Trinity Western University
Judith Scanlan, University of Manitoba
Karen Spalding, Ryerson University
Shirley Solberg, Memorial University
Chantal Saint-Pierre, Université du Québec en Outaouais
Ann Tourangeau, University of Toronto
Jocelyne Tourigny, University of Ottawa
Kathy Wilson, University of New Brunswick
CASN President
CASN Executive Director
CASN Staff liaison

CASN Task Force on Clinical Placements

Barbara Bleasdale, Dalhousie University
Sandra DeLuca, Fanshawe College, University of Western Ontario, CASN Board of Directors
Kerry Lynn Durnford, Aurora College
Sandra Gessler, University of Manitoba
Sandra Gordon, Mount Royal University
Nicole Harder, University of Manitoba
Catherine Hoe Eriksen, Trinity Western University
Kathleen Lechasseur, Université Laval
Claudine Morgan, Memorial University
Alice Ormiston, Council of Ontario Universities
Brian Parker, Grant MacEwan University
Monica Reilly, Colleges Ontario
Jayne Smitten, University of Alberta
Catherine Tompkins, McMaster University
Barbara Turner, Western Regional School of Nursing
Bev Williams, University of Alberta
CASN President
CASN Executive Director
CASN Staff liaison

Advocacy Committee

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

Working Group on the New Registration Exam

Judith McFetridge-Durdle (Chair), Memorial University
Evelyn Kennedy, Cape Breton University
Julie Gibler, Vancouver Island University
Noreen Frisch, University of Victoria
Patricia Bradley, York University
Zoraida Beekhoo, University of Toronto
CASN President
CASN Executive Director
CASN Staff liaison

Advisory Task Force on Cultural Competence and Cultural Safety

Sylvia Barton, University of Alberta
Lisa Bourque-Bearskin, Aboriginal Nurses Association of Canada, and University of Alberta
Denise Bowen, CASN Board of Directors
Elizabeth Cook, Assembly of First Nations
Elizabeth Ford, Inuit Tapiriit Kanatami
Joyce Ford, Inuit Tapiriit Kanatami
Cathy Graham, Trent/Fleming School of Nursing
David Gregory, University of Regina
Star Mahara, Thompson Rivers University
Jane Moseley, St. Francis Xavier University
Denise Newton Mathur, Laurentian University
Wanda Pierson, Langara College
Sheryl Reimer-Kirkham, Trinity Western University
Victoria Smye, University of British Columbia
Maureen Stewart, Health Canada
Gail Turner, Nunatsiavut Government
Colleen Varcoe, University of British Columbia
Evelyn Voyageur, Aboriginal Nurses Association of Canada
Fjola Hart Wasekeesikaw, Aboriginal Nurses Association of Canada
CASN President
CASN Executive Director
CASN Staff liaison

CASN-Infoway Task Force

Alexandra Harris, University of Toronto
Elizabeth Borycki, University of Victoria
Irma Jean Bajnok, Registered Nurses Association of Ontario
Irving Gold, Association of Faculties of Medicine of Canada
Kathryn Hannah, University of Calgary
Loretta Secco, University of New Brunswick
Lorie Donelle, University of Western Ontario
Lynn Nagle, University of Toronto
Mary Strain, CNSA
Maureen Charlebois, Canada Health Infoway
Margot McNamee, Canadian Nurses Association
Noreen Frisch, University of Victoria
Patricia Seaman, University of New Brunswick
Sandra Bassendowski, University of Saskatchewan
Sylvie Dubois, Université de Montréal
Sylvie Jetté, Université de Sherbrooke
Tracy Shaben, Mazankowski Alberta Heart Institute
CASN President
CASN Executive Director
CASN Staff liaison

FINANCIAL STATEMENTS/ÉTATS FINANCIERS
For/Pour
THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING/
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES
FOR THE YEAR ENDED MARCH 31, 2012/
POUR L'EXERCICE CLOS LE 31 MARS 2012

INDEPENDENT AUDITOR'S REPORT

To the members of

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING

We have audited the accompanying financial statements of The Canadian Association of Schools of Nursing, which comprise the statement of financial position as at March 31, 2012 and the statements of operations, changes in net assets and cash flows for the year then ended, and a summary of significant accounting policies and other explanatory information.

Management's Responsibility for the Financial Statements

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

Auditor's Responsibility

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

RAPPORT DE L'AUDITEUR INDÉPENDANT

Aux membres de

L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES

Nous avons effectué l'audit des états financiers ci-joints de l'Association canadienne des écoles de sciences infirmières, qui comprennent l'état de la situation financière au 31 mars 2012 ainsi que les états des opérations, de l'évolution de l'actif net et des flux de trésorerie pour l'exercice clos à cette date, ainsi qu'un résumé des principales méthodes comptables et d'autres informations explicatives.

Responsabilité de la direction pour les états financiers

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

Responsabilité de l'auditeur

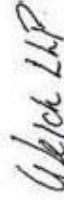
Notre responsabilité consiste à exprimer une opinion sur les états financiers, sur la base de notre audit. Nous avons effectué notre audit selon les normes d'audit généralement reconnues du Canada. Ces normes requièrent que nous nous conformions aux règles de déontologie et que nous planifions et réalisons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

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

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

Opinion

In our opinion, the financial statements present fairly, in all material respects, the financial position of The Canadian Association of Schools of Nursing as at March 31, 2012 and the results of its operations, the changes in its net assets and its cash flows for the year then ended in accordance with Canadian generally accepted accounting principles.



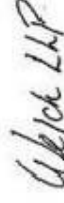
Chartered Accountants
Licensed Public Accountants
Ottawa, Ontario
September 20, 2012.

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

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

Opinion

À notre avis, les états financiers donnent, dans tous leurs aspects significatifs, une image fidèle de la situation financière de l'Association canadienne des écoles de sciences infirmières au 31 mars 2012, ainsi que des résultats de ses opérations financières, de l'évolution de son actif net et de ses flux de trésorerie pour l'exercice clos à cette date, conformément aux principes comptables généralement reconnus du Canada.



Comptables agréés
Experts-comptables autorisés
Ottawa (Ontario)
le 20 septembre 2012.

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING/
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES
STATEMENT OF FINANCIAL POSITION/ÉTAT DE LA SITUATION FINANCIÈRE
MARCH 31, 2012/31 MARS 2012

ASSETS

CURRENT ASSETS

Cash
Accounts receivable
Inventory of gifts and awards
Security deposits and prepaid expenses
Due from Global Alliance for Leadership in Nursing Education and Science - note 6
Investments - note 7

\$ 293,666 \$ 307,254
454,255 233,256
4,693 1,817
32,500 34,330
3,327 5,327
415,661 440,045
1,204,102 1,022,029

CAPITAL ASSETS - note 8

10,869 11,841

LIABILITIES AND NET ASSETS

CURRENT LIABILITIES

Accounts payable and accrued liabilities
Deferred conference, accreditation and membership fees

\$ 75,581 \$ 107,255
219,399 205,273
294,980 312,528

NET ASSETS

Internally restricted:
Invested in capital assets
Dr. Pat L. Griffin Memorial Fund - note 11

Unrestricted:
Cumulative net revenue
Cumulative net unrealized gains on available for sale unrestricted financial assets

10,869 11,841
89,402 77,387
789,540 598,640
30,180 33,474
919,991 721,342

\$ 1,214,971 \$ 1,033,870

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

STEPHEN BISHOP, RN, MN

..... Treasurer/Trésorière

CYNTHIA BAKER, RN, PhD

..... Executive Director/Directrice exécutive

ACTIF

ACTIF À COURT TERME

Encaisse
Débiteurs
Stock de cadeaux et de prix
Dépôts de sécurité et dépenses payées d'avance
À recevoir de Global Alliance for Leadership in Nursing Education and Science - note 6
Placements - note 7

IMMOBILISATIONS - note 8

PASSIF ET ACTIF NET

PASSIF À COURT TERME

Créditeurs et frais courus
Congrès, agréments et cotisations des membres reportés

ACTIF NET

Restreint à l'interne:
Investi dans les immobilisations
Fonds commémoratif Dr Pat L. Griffin - note 11
Non-restreint:
Revenu cumulatif net
Gain net non-réalisé cumulatif sur les actifs financiers non-restreints disponibles pour la revente

(See accompanying notes/voir notes ci-jointes)

Welch LLP

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THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING/
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES
STATEMENT OF CHANGES IN NET ASSETS/ÉTAT DE L'ÉVOLUTION DE L'ACTIF NET
YEAR ENDED MARCH 31, 2012/EXERCICE CLOS LE 31 MARS 2012

	Unrestricted/Non-restreint	Internally restricted/ Restreint à l'interne					
	Operating fund/ Fonds des opérations	Net unrealized gain on available for sale financial assets/ Gain net non-réalisé sur les actifs financiers disponibles pour la revente	Invested in capital assets/ Investi dans les immobilisations	Dr. Pat L. Griffin Memorial Fund/ Fonds commémoratif Dr Pat L. Griffin	2012 Total	2011 Total	
Net revenue	\$ 201,943	\$ -	\$ -	\$ -	\$ 201,943	\$ 147,949	Revenu net
Net additions to capital assets	(9,111)	-	9,111	-	-	-	Additions nettes aux immobilisations
Amortization of capital assets	10,083	-	(10,083)	-	-	-	Amortissement des immobilisations
Transfer to Dr. Pat L. Griffin Memorial Fund of 10% of the net revenue of the prior year	(14,795)	-	-	14,795	-	-	Virement au Fonds commémoratif Dr Pat L. Griffin de 10% du revenu net de l'exercice précédent
Donation made	5,500	-	-	(5,500)	-	-	Dons payés
Donation received	(2,720)	-	-	2,720	-	-	Dons reçue
Change in unrealized gain on investments during year	-	(3,294)	-	-	(3,294)	9,581	Changements dans les gains non-réalisés au cours de l'exercice
Increase (decrease) in net assets for the year	190,900	(3,294)	(972)	12,015	198,649	157,530	Augmentation (diminution) dans l'actif net au cours de l'exercice
Balance at beginning of year	<u>598,640</u>	<u>33,474</u>	<u>11,841</u>	<u>77,387</u>	<u>721,342</u>	<u>563,812</u>	Solde au début de l'exercice
Balance at end of year	<u>\$ 789,540</u>	<u>\$ 30,180</u>	<u>\$ 10,869</u>	<u>\$ 89,402</u>	<u>\$ 919,991</u>	<u>\$ 721,342</u>	Solde à la fin de l'exercice

(See accompanying notes/voir notes ci-jointes)

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

STATEMENT OF OPERATIONS/ÉTAT DES OPÉRATIONS

YEAR ENDED MARCH 31, 2012/EXERCICE CLOS LE 31 MARS 2012

	2012	2011	
Revenue			Revenus
Membership fees			Cotisations des membres
Special projects, grants and contributions	\$ 717,666	\$ 681,870	Projets spéciaux, subventions et contributions
Accreditation support fees	757,062	316,820	Fonds de soutiens pour l'agrément
Accreditation and site review fees	184,000	179,750	Droits d'examen d'agrément
Conferences	76,100	121,564	Congrès
Council meeting	80,087	133,251	Rencontres du Conseil
Advertising and publications	55,560	56,881	Publicité et publications
Donations	13,850	12,188	Dons
Investment income - note 9	2,720	8,175	Revenus de placements - note 9
	<u>1,899,577</u>	<u>1,514,898</u>	
Expenses			Dépenses
Corporate services	374,942	433,933	Services corporatifs
Accreditation bureau	201,981	205,356	Bureau de l'agrément
Special projects	757,062	316,820	Projets spéciaux
National office	117,730	121,768	Bureau national
Conferences	134,339	154,480	Congrès
Rent and utilities	72,966	72,086	Loyers et services publics
International	1,618	19,429	International
Professional fees	31,496	37,577	Honoraires professionnels
Donations	5,500	5,500	Dons
	<u>1,697,634</u>	<u>1,366,949</u>	
Net revenue for the year	<u>\$ 201,943</u>	<u>\$ 147,949</u>	Revenu net de l'exercice

(See accompanying notes/voir notes ci-jointes)

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING/
L'ASSOCIATION CANADIENNE DES ÉCOLES DE SCIENCES INFIRMIÈRES
STATEMENT OF CASH FLOWS/ÉTAT DES FLUX DE TRÉSORERIE
YEAR ENDED MARCH 31, 2012/EXERCICE CLOS LE 31 MARS 2012

	2012	2011	
CASH PROVIDED BY (USED FOR):			ENCAISSE FOURNIE (UTILISÉE) PAR:
OPERATING ACTIVITIES			LES ACTIVITÉS D'EXPLOITATION
Net revenue for the year	\$ 201,943	\$ 147,949	Revenu net de l'exercice
Adjustment for amortization	<u>10,083</u>	<u>9,681</u>	Ajustement pour l'amortissement
	212,026	157,630	
Change in the level of:			Changement dans le niveau des:
Accounts receivable	(220,999)	(173,751)	Débiteurs
Inventory of gifts and awards	(2,876)	2,659	Stock de cadeaux et de prix
Security deposits and prepaid expenses	1,830	(8,230)	Dépôts de sécurité et dépenses payées d'avance
Due from Global Alliance for Leadership in Nursing Education and Science	2,000	-	À recevoir de Global Alliance for Leadership in Nursing Education and Science
Accounts payable and accrued liabilities	(31,674)	3,377	Créditeurs et frais courus
Deferred conference, accreditation and membership fees	<u>14,126</u>	<u>(129,414)</u>	Congrès, agréments et cotisations des membres reportés
	<u>(25,567)</u>	<u>(147,729)</u>	
INVESTING ACTIVITIES			ACTIVITÉS D'INVESTISSEMENT
Purchase of capital assets	(9,111)	(2,258)	Achat d'immobilisations
Proceeds on sales of investments - net	21,090	228,288	Achat de placements
	<u>11,979</u>	<u>226,030</u>	
CASH PROVIDED (USED) IN YEAR	(13,588)	78,301	ENCAISSE FOURNIE (UTILISÉE) AU COURS DE L'EXERCICE
CASH AT BEGINNING OF YEAR	<u>307,254</u>	<u>228,953</u>	ENCAISSE AU DÉBUT DE L'EXERCICE
CASH AT END OF YEAR	<u>\$ 293,666</u>	<u>\$ 307,254</u>	ENCAISSE À LA FIN DE L'EXERCICE

(See accompanying notes/voir notes ci-jointes)

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

**NOTES TO THE FINANCIAL STATEMENTS
YEAR ENDED MARCH 31, 2012**

**NOTES AUX ÉTATS FINANCIERS
EXERCICE CLOS LE 31 MARS 2012**

1. PURPOSE OF ORGANIZATION The Canadian Association of Schools of Nursing (CASN) is a not-for-profit organization formed in 1942, and incorporated in 2003, with the objective of leading nursing education and nursing scholarship in the interest of healthier Canadians. The Association is a registered charity and as such is exempt from income taxes.	1. OBJECTIFS DE L'ENTITÉ L'Association canadienne des écoles de sciences infirmières (ACESI) est un organisme sans but lucratif fondé en 1942 et constitué en 2003. Les objectifs de la société sont d'orienter la formation infirmière et d'avancer les connaissances en sciences infirmières dans l'intérêt d'une meilleure santé des Canadiennes et des Canadiens. L'Association est un organisme de charité aux fins de la Loi sur l'impôt au Canada et en tant que tel est exempt d'impôt sur le revenu.
2. SIGNIFICANT ACCOUNTING POLICIES <i>Revenue recognition</i> The Association records revenue from membership fees and accreditation support fees in the fiscal year to which they relate, if receipt thereof is reasonably assured. The Association records revenue from accreditation and review fees when the site review has been substantially completed if receipt thereof is reasonably assured. Revenue from advertising is recognized when the service has been rendered and revenue from publications is recognized upon delivery. Donation revenue is accounted for when received. Investment income includes dividends and interest income, amortization of discounts and premiums on fixed income investments, and realized gains and losses. Unrealized gains and losses on available for sale financial assets are included directly in net assets until the asset is disposed of. Council meeting revenue is recognized at the time of the meeting if receipt thereof is reasonably assured. Conference revenue is recognized at the time of the conference if receipt thereof is reasonably assured. Special project revenue is recognized on special projects at the time the deliverable is presented. The Association follows the deferral method of accounting for contributions and grants. Restricted contributions are recognized as revenue in the year in which the related expenses are incurred. Unrestricted contributions are recognized as revenue when they are received or receivable if the amount can be reasonable estimated and its collection can be reasonable assured.	2. PRINCIPALES CONVENTIONS COMPTABLES <i>Constatation des recettes</i> L'Association inscrit aux livres les cotisations des membres et les fonds de soutiens pour agrément dans l'année fiscale durant laquelle ils sont dus, pourvu que le recouvrement soit raisonnablement sûr. L'Association inscrit les produits des droits d'examen d'agrément lorsque l'examen du programme a été achevé ou quasi achevé, pourvu que le recouvrement soit raisonnablement sûr. Les produits de publicité sont inscrits lorsque le service a été rendu. De même, les produits des publications sont inscrits lorsque les publications ont été livrées. Les produits issus de dons sont inscrits lorsqu'ils sont reçus. Les revenus de placements comprennent les revenus d'intérêt et les dividendes, l'amortissement des primes et des escomptes sur les obligations, et les gains et pertes de capital réalisés. Les gains et pertes de capital non réalisés sur les actifs financiers disponibles à la vente sont inclus directement dans les actifs nets jusqu'au moment de la vente de l'actif financier en question. Les produits des rencontres du Conseil sont inscrits lorsque la rencontre a lieu, pourvu que le recouvrement soit raisonnablement sûr. Les produits des congrès sont inscrits lorsque le congrès a lieu, pourvu que le recouvrement soit raisonnablement sûr. Les produits des projets spéciaux sont inscrits au compte des projets spéciaux lorsque l'objectif du projet est atteint ou le produit final est livré. L'Association utilise la méthode du report pour les contributions et les subventions. Les contributions et subventions affectées sont reconnues comme produit dans l'année où les charges afférentes sont encourues. Les contributions et subventions non affectées sont reconnues comme produit lorsqu'elles sont reçues ou lorsqu'elles sont à recevoir et que le montant de la contribution ou de la subvention et son recouvrement est raisonnablement sûr.

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

NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
YEAR ENDED MARCH 31, 2012

NOTES AUX ÉTATS FINANCIERS - Suite
EXERCICE CLOS LE 31 MARS 2012

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

NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
YEAR ENDED MARCH 31, 2012

NOTES AUX ÉTATS FINANCIERS - Suite
EXERCICE CLOS LE 31 MARS 2012

3. FINANCIAL INSTRUMENTS	3. INSTRUMENTS FINANCIERS
The Association's cash is classified as held for trading and is measured at fair value. The Association's investments are classified as available for sale and are measured at fair value. The Association's accounts receivable and Due from Global Alliance for Leadership in Nursing Education and Science are classified as loans and receivables, and its accounts payable and accrued liabilities are classified as liabilities. Amounts classified as loans and receivables and other liabilities are measured at amortized cost in the financial statements which approximates fair value due to their short term nature.	L'encaisse est classé comme détenue pour fins de transactions et est inscrit aux livres à sa juste valeur. Les placements de l'Association sont classés comme disponible à la vente et inscrits aux livres à leur juste valeur. Les débiteurs et le montant à recevoir de Global Alliance for Leadership in Nursing Education and Science sont classés en tant que prêts et débiteurs, et les comptes à payer et frais courus sont classés comme autres passifs. Les montants inscrits dans les prêts, débiteurs et autres passifs sont inscrits au coût amorti dans les états financiers, ce qui équivaut à leur juste valeur à cause de la nature courante de ces postes.

Credit risk

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

Risque de crédit

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

Interest rate risk and other price risk

The Association manages the interest rate risk and market rate exposure of its investments by investing a large proportion of its portfolio (80%) in a combination of Guaranteed Investment Certificates with laddered maturity dates, and money market funds. The balance of the portfolio (20%) is invested in equities, which are exposed to other price risks.

Risque de taux d'intérêt et autre risque de marché

L'Association gère l'exposition aux risques du taux d'intérêt et du marché de ses placements en investissant une part importante de son portfolio (80%) dans une combinaison de certificats de placements garantis ayant des échéances échelonnées et de fonds du marché monétaire. Le solde du portfolio (20%) est investi dans des actions qui sont exposées à d'autres risques de marché.

Currency risk

The Association is only exposed to currency risk to the extent that approximately 8% of its investments are held in a Foreign Equity Mutual Fund. Substantially all other transactions are denominated in Canadian dollars.

Risque de change

L'Association est exposée au risque de change dans la mesure où elle investi près de 8% de ses fonds dans un Fonds mutuel d'actions étrangères. Presque toutes ses autres transactions sont effectuées en dollars canadiens.

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING/
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NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
YEAR ENDED MARCH 31, 2012

NOTES AUX ÉTATS FINANCIERS - Suite
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4. FUTURE ACCOUNTING STANDARDS FOR THE NOT-FOR-PROFIT SECTOR
- The Accounting Standards Board of the Canadian Institute of Chartered Accountants (CICA) recently approved a financial reporting framework designed specifically to meet the needs of users of financial statements prepared by not-for-profit organizations. Not-for-profit organizations are also given the option to adopt International Financial Reporting Standards (IFRS). One of these new standards must be applied to the Association by its March 31, 2013 fiscal year. Management is currently evaluating the impact of these new reporting frameworks on its financial statements.
4. NORMES DE COMPTABILITÉ FUTURES POUR LES ORGANISMES SANS BUT LUCRATIF
- Le Conseil des normes comptables de l'Institut canadien des comptables agréés (ICCA) a récemment approuvé la mise en place d'un cadre conceptuel d'information financière conçu spécifiquement afin de rencontrer les besoins des utilisateurs des états financiers préparés par les organismes sans but lucratif. Aussi, les organismes sans but lucratif ont le choix d'adopter les Normes internationales d'information financière (IFRS). Une de ces nouvelles normes doit être appliquée aux états financiers de l'Association pour l'exercice terminé le 31 mars 2013. La direction évalue présentement l'impact de ces nouveaux cadres conceptuels sur ses états financiers.

5. ALLOCATION OF EXPENSES

Salary expenses of \$770,027 (2011 - \$643,014) have been allocated to specific functions, based on the Association's calculation of actual use, as follows:

	<u>2012</u>	<u>2011</u>
Conferences	\$ 43,019	\$ 54,365
Accreditation bureau	149,576	131,604
Corporate services	246,322	304,535
Special projects	<u>331,110</u>	<u>152,510</u>
	<u>\$ 770,027</u>	<u>\$ 643,014</u>

A portion of rent expense has been allocated to special projects, based on the Association's calculation of actual use, as follows:

	<u>2012</u>	<u>2011</u>
Rent allocated to special projects	\$ 32,286	\$ 22,800
Unallocated rent and utilities	<u>72,966</u>	<u>72,086</u>
Total rent	<u>\$ 105,252</u>	<u>\$ 94,886</u>

5. REPARTITION DES DÉPENSES

Des dépenses de salaires de 770 027 \$ (2011 - 643 014 \$) ont été réparties à des fonctions spécifiques, selon les calculs de l'Association de l'utilisation réelle, comme suit:

	<u>2012</u>	<u>2011</u>
Congrès	\$ 54 365	\$ 54 365
Bureau de l'agrément	149 576	131 604
Services corporatifs	246 322	304 535
Projets spéciaux	<u>331 110</u>	<u>152 510</u>
	<u>\$ 770 027</u>	<u>\$ 643 014</u>

Une portion de la dépense de location à été répartie aux projets spéciaux selon les calculs de l'Association de l'utilisation réelle, comme suit:

	<u>2012</u>	<u>2011</u>
Loyers alloués aux projets spéciaux	\$ 32 286	\$ 22 800
Loyers et services publics non répartis	<u>72 966</u>	<u>72 086</u>
Loyer total	<u>\$ 105 252</u>	<u>\$ 94 886</u>

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NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
YEAR ENDED MARCH 31, 2012

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6. RELATED PARTY TRANSACTIONS

The Association is in an alliance with "Global Alliance for Leadership in Nursing Education and Science (GANES)". The Association is one of the five members of the Alliance and CASN provided the bookkeeping services for GANES, free of charge. At year end, an amount of \$3,327 (2011: \$5,327) was receivable from GANES interest free and with no definite terms of repayment.

6. OPÉRATIONS ENTRE DES PARTIES LIÉES

L'association est membre d'une alliance "Global Alliance for Leadership in Nursing Education and Science (GANES)". L'Association est l'un des cinq membres de l'Alliance et l'Association fait la tenue de livres de GANES gratuitement. À la fin de l'exercice clos le 31 mars 2012, l'Association avait un compte à recevoir de 3 327 \$ (2011: 5 327 \$), sans intérêts et sans modalités fixes de remboursement.

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

Les transactions avec cette entité affiliée sont inscrites à leur valeur d'échange en accord avec les traités signés entre les parties.

7. INVESTMENTS

Investments consist of the following:

	2012	2011
	Cost/ Coût	Fair value/ Juste valeur
Guaranteed investment certificates	\$ 304,815	\$ 304,815
Canadian money market funds	27,287	27,287
Canadian equity mutual fund	35,974	50,680
Foreign equity mutual fund	<u>17,404</u>	<u>32,879</u>
	<u>\$ 385,480</u>	<u>\$ 415,661</u>

7. PLACEMENTS

Les placements de l'entreprise étaient les suivants:

	2012	2011
	Cost/ Coût	Fair value/ Juste valeur
Certificats de placements	\$ 327,038	\$ 327,038
Fonds du marché monétaire canadien	27,170	27,170
Fonds d'actions mutuelles canadien	35,935	56,418
Fonds mutuel d'actions étrangères	<u>16,428</u>	<u>29,419</u>
	<u>\$ 406,571</u>	<u>\$ 440,045</u>

8. CAPITAL ASSETS

Capital assets consist of the following:

	2012	2011
	Cost/ Coût	Accumulated amortization/ Amortissement cumulé
Computer equipment	\$ 31,938	\$ 21,281
Office equipment	707	495
Leasehold improvements	<u>64,063</u>	<u>64,063</u>
	<u>96,708</u>	<u>\$ 85,839</u>
Accumulated amortization	<u>85,839</u>	
	<u>\$ 10,869</u>	

Les immobilisations comprennent ce qui suit:

	2012	2011
	Cost/ Coût	Accumulated amortization/ Amortissement cumulé
Équipement informatique	\$ 22,827	\$ 13,645
Matériel de bureau	707	355
Améliorations locatives	<u>64,063</u>	<u>61,756</u>
	<u>87,597</u>	<u>\$ 75,756</u>
Amortissement cumulé	<u>75,756</u>	
	<u>\$ 11,841</u>	

THE CANADIAN ASSOCIATION OF SCHOOLS OF NURSING/
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NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
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9. INVESTMENT INCOME	9. REVENU DE PLACEMENTS
Interest	\$ 11,399
Dividends	\$ 4,225
	<u>174</u>
	<u>\$ 12,532</u>
	<u>\$ 4,399</u>

10. COMMITMENTS

The Association has entered into a commercial lease for their office headquarters ending April 2014. As at March 31, 2012, the balance to be paid under this lease commitment, including operating costs, is approximately as follows:

2013	\$ 109,898
2014	109,898
2015	9,158

10. ENGAGEMENTS

L'Association a signé un bail commercial pour leur siège social qui se termine en avril 2014. Au 31 mars 2012 le solde à payer pour ces engagements, incluant les coût d'opérations, étaient d'environ:

2013	
2014	
2015	

11. DR. PAT L. GRIFFIN MEMORIAL FUND

The fund was established by the Board of Directors on May 10, 2007.

The purpose of this fund is to acknowledge Dr. Griffin by supporting Canadian research in nursing education and establishing a chair in nursing education.

During the year, the Board of Directors directed that \$14,795 be transferred into the fund from unrestricted net assets. This amount represents ten percent of the 2011 net revenue. Also, all donations received are to be allocated to this fund.

11. LE FONDS COMMÉMORATIF DR PAT L. GRIFFIN

Ce fonds a été établi par le conseil d'administration le 10 mai 2007.

Le but de fonds est de rendre hommage au Dr Griffin en supportant la recherche canadienne en soins infirmiers et en instaurant une chaire en formation de soins infirmiers.

Au cours de l'année un montant de 14 795 \$ des actifs nets non-restreints ont été transférés au Fonds commémoratif selon les directives du Conseil d'administration. Ce montant représente dix pourcent du revenu net de 2011. Aussi, tous les dons reçus sont alloués à ce fonds.

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NOTES TO THE FINANCIAL STATEMENTS - Cont'd.
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12. CAPITAL

The Association defines its capital as its net assets. The organization's objectives with respect to managing capital are to comply with any external restrictions on its net assets and to hold sufficient unrestricted net assets to fund ongoing operations. The organization monitors its capital requirements and objectives through its budgeting process, its financial statement review process and review of these terms and conditions contained in its agreements. Management believes that the organization has adhered to any externally imposed restrictions (primarily on grants, contributions and special projects).

12. CAPITAL

L'Association définit son capital comme étant son actif net. Les objectifs de l'Association en ce qui concerne la gestion de son capital sont de se conformer aux restrictions externes et de maintenir suffisamment de fonds non-restreints pour financer ses opérations. L'organisation contrôle ses objectifs et exigences en ce qui a trait à son capital par son processus budgétaire, son processus d'examen des états financiers et la révision des conditions comprises dans ses ententes de contribution. La direction croit que l'Association s'est conformée aux restrictions externes (surtout en ce qui a trait aux subventions, contributions et projets spéciaux).

13. COMPARATIVE FIGURES

Certain comparative figures have been reclassified in order to conform to the presentation adopted for the current year.

13. CHIFFRES CORRESPONDANT

Certains chiffres correspondants ont été reclassés où nécessaire pour les rendre conformes à la présentation adoptée pour l'exercice courant.



FROM: _____

DATE: _____

AMOUNT: _____

SIGNATURE: _____

Dr. Pat L. Griffin Fund of CASN

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

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

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

Donations to this fund will be accepted by CASN, 99 Fifth Avenue, Suite 15, Ottawa ON K1S 5K4.
Please issue cheque in the "Dr. Pat L. Griffin Fund".

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

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



THANK YOU FOR YOUR PARTICIPATION IN THE
2012 CASN COUNCIL MEETING.
SEE YOU NEXT YEAR!



NOUS VOUS REMERCIONS POUR VOTRE
PARTICIPATION À LA RÉUNION DU
CONSEIL DE L'ACÉSI DE 2012
À L'AN PROCHAINE!

