

SASKATCHEWAN



Self-Employed Practice:

Guidelines for Registered Nurses

Revised, September 2012

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TABLE OF CONTENTS

Introduction	4
Definition	5
Legislation and Regulatory Requirements	6
Scope of Practice	6
Recognition of Position as Approved Nursing Practice	7
Use of Title	7
Continuing Competence	7
Responsibilities of Self-Employed RNs	8
Ethical Considerations	8
Information Management	8
Confidentiality	9
Quality Improvement and Risk Management	10
Insurance	11
Professional Liability Insurance	11
Business Insurance	11
Advertising	12
Conflict of Interest	12
Endorsement	12
Treating Family or Friends	12
Conclusion	13
References	14
Appendix A - Getting Started	16
Appendix B – Web Resources	18

INTRODUCTION

Increasingly, health care organizations are looking for registered nurses (RNs) to provide health care services on a contractual basis. This environment provides RNs with the opportunity to practice within their scope of practice in a unique setting. The Saskatchewan Registered Nurses' Association (SRNA) believes that self-employed RNs provide health services that contribute to the health of the people of Saskatchewan.

The purpose of this document is to provide guidance to self-employed RNs to identify primary responsibilities consistent with related legislation, regulations, bylaws and standards. While SRNA standards and competencies, bylaws, policies and guidelines apply to RNs in all practice settings, some have particular importance for RNs who practice in a self-employed role. The RN in self-employed practice must practice within the scope of registered nursing as determined by *The Registered Nurses Act, 1988* and interpreted by the SRNA. The RN(NP) can use their expanded scope of practice to provide non-insured health services (i.e., insurance medicals), however cannot charge a fee for covered services in accordance with the *Canada Health Act*.

For the purposes of this document RN refers to: registered nurses and registered nurse (nurse practitioners). It is recommended that RNs pursuing self-employed practice review the current Canadian Nurses Association (CNA) *Code of Ethics for Registered Nurses*, *SRNA Standards and Foundation Competencies for the Practice of Registered Nurses*, the *Registered Nurse (Nurse Practitioner) RN(NP) Standards & Core Competencies* and *Clinical Expectations for RN(NP)s* as appropriate. The information contained in this guideline is current as of the publication date.

In addition to professional requirements, each RN seeking to set up a self-employed practice should, for business considerations, contact independent legal counsel, accountants and other relevant resources to ensure compliance with relevant legislation, regulations and best practices pertinent to the practice area. Business considerations are presented in a self-assessment format in Appendix A. **The questions presented are intended to be a starting point for RNs who are considering a self-employed practice and is not intended to replace legal advice or professional accounting services.**

DEFINITION

Self-employed RNs apply nursing knowledge, skill and judgment in the provision of health services to clients in a variety of settings and roles in the areas of direct care, advocacy, health promotion, education, policy, research, administration or consultation through a negotiated contract with another party. Clients may be individuals, families, groups, communities, educational institutions, corporations or other health care agencies. Self-employed RNs may provide health services independently, in partnership with other practitioners or employ others to do so (NANB, 2008). For the purposes of this document the term self-employed practice will be used to represent private practice, independent practice and/or working as a consultant.

The self-employed RN is directly accountable to clients and develops policies and procedures based on evidence, best practice guidelines, SRNA standards and competencies and the CNA code of ethics. The RN should have post-basic education plus experience and extensive nursing expertise in the practice area related to their business to deliver care with knowledge, skill and judgment in a self-employed setting (Shirley, 2007). The self-employed RN should refer to SRNA guidelines and relevant scope of practice documents in situations where the registered nursing care is more complex and requires physician oversight. The RN in self-employed practice should connect with relevant experts to attain specialty competencies as required. The SRNA does not recommend self-employed practice for new graduates or RNs with limited or no recent relevant nursing practice experience.

LEGISLATION AND REGULATORY REQUIREMENTS

Scope of Practice

The self-employed RN must comply with *The Registered Nurses Act, 1988*, the current *SRNA Bylaws, Standards and Foundation Competencies for the Practice of Registered Nurses* and/or the current *Registered Nurse (Nurse Practitioner) RN(NP) Standards & Core Competencies*, and the *CNA Code of Ethics for Registered Nurses*. The RN must also be knowledgeable and in compliance with other relevant health care, privacy and business legislation as applicable to their practice.

RNs are legally permitted to offer any health service that falls within the practice of nursing as interpreted by the SRNA. Section 2(k) of *The Registered Nurses Act, 1988* clearly defines the scope of registered nursing practice:

- (k) “practice of registered nursing” means the performance or co-ordination of health care services including but not limited to:
 - (i) observing and assessing the health status of clients and planning, implementing and evaluating nursing care; and
 - (ii) the counselling, teaching, supervision, administration and research that is required to implement or complement health care services; for the purpose of promoting, maintaining or restoring health, preventing illness and alleviating suffering where the performance or co-ordination of those services requires:
 - (iii) the knowledge, skill or judgment of a person who qualifies for registration pursuant to section 19 or 20;
 - (iv) specialized knowledge of nursing theory other than that mentioned in subclause (iii);
 - (v) skill or judgment acquired through nursing practice other than that mentioned in subclause (iii); or
 - (vi) other knowledge of biological, physical, behavioural, psychological and sociological sciences that is relevant to the knowledge, skill or judgment described in subclause (iii), (iv) or (v).

The legislated scope of practice:

- encompasses all the activities in which RNs may engage, and
- provides a basis for individual RN scope of practice based on the needs of the clients in the setting and within the scope of that individual RN’s knowledge, skill and judgment.

Registered nursing activities are performed through the continuous, ongoing application of the nursing process. Self-employed RN practice must reflect all components of the nursing process:

- assessment,
- nursing diagnosis,
- planning,
- implementation, and
- evaluation.

While providing registered nursing care, self-employed RNs are accountable to their professional standards, competencies and code of ethics. RNs in self-employed practice should provide information to clients to ensure they are aware that there is a regulatory process for addressing concerns regarding professional RN practice.

Recognition of Position as Approved Nursing Practice

Recognition of practice is the regulatory process used by the SRNA to determine if a RN's self-employed practice is approved registered nursing practice. Through the recognition of practice process, RNs provide documentation about their nursing activities to the Registrar. The documentation is reviewed to confirm that the practice falls within the scope of registered nursing. Participation in this process is not mandatory, however it is highly recommended in order to ensure liability protection through the Canadian Nurses Protective Society (CNPS) and to have practice hours counted towards hourly practice requirements. Information about review requirements can be obtained by contacting the SRNA Regulatory Services department.

If a service provided by a self-employed RN is not approved by the SRNA as registered nursing practice, the practice hours related to providing that particular service cannot be applied toward annual renewal of the self-employed RN's license, the RN cannot use the title of RN or RN(NP) in association with the provision of that particular service and the RN would not have liability protection through CNPS.

Use of Title

A self-employed RN or RN(NP) may only use the title 'nurse', 'Registered Nurse', 'Reg. N', 'RN', 'Registered Nurse (Nurse Practitioner)' or 'RN(NP)' when engaging in the practice of registered nursing as outlined in *The Registered Nurses Act, 1988* and recognized by the SRNA. The title 'RN' or 'RN(NP)' may be used in marketing activities for approved professional nursing services since it helps the consumer to make an informed decision when choosing a health service provider. See the Advertising section for information regarding advertising and endorsing.

Continuing Competence

Adherence to the SRNA Continuing Competence Program (CCP) is mandatory for all active practicing RNs, including those in self-employed practice. All RNs are required to:

- meet requirements for annual registration renewal including currency of approved nursing practice hours and compliance with the SRNA Continuing Competence Program,
- submit practice hours if randomly audited, and
- submit CCP audit documentation if randomly audited on an annual basis, therefore it is recommended that a log of nursing practice hours be kept in case you are audited.

More information on the CCP can be found on the SRNA website. Nursing practice advisors are also available for consultation if you have questions about how your practice fits with the program.

RESPONSIBILITIES OF SELF-EMPLOYED RNS

The RN in self-employed practice assumes full responsibility and accountability for the provision of quality client care. This professional autonomy requires commitment from the RN to:

1. Hold a current practicing membership with the SRNA.
2. Practice within their scope of practice in accordance with SRNA standards, competencies and code of ethics.
3. Demonstrate knowledge, skill and judgment in the particular area of practice.
4. Develop a philosophy and written description of the scope (job description) of the intended area of practice.
5. Develop written policies and procedures, in accordance with SRNA standards, competencies, and guidelines, to describe nursing practice.
6. Develop written directives to address hours of work, client referral procedures, client evaluation of service, business and financial management, and liability insurance coverage.
7. Complete the annual SRNA continuing competence requirements.
8. Utilize research findings and apply best practices where appropriate.
9. Utilize a documentation system that conforms to professional and legal principles.
10. Obtain informed consent for treatment from the client.
11. Serve as an advocate for the client.

Ethical Considerations

Self-employed RNs must comply with the current CNA *Code of Ethics for Registered Nurses* (see Appendix B – Resources). RNs will not exploit any relationship they have established as RNs to further their own physical, emotional, financial, political or business interests at the expense of the best interest of clients. For example, self-employed RNs must not:

- coerce or take advantage of trust or dependency to initiate or continue treatment of a client where it is ineffective, unnecessary or no longer indicated;
- breach an agreement with a client regarding the use of resources for provision of services; or
- prejudice others against a colleague for reasons of personal gain.

Information Management

Managing information and maintaining accurate documentation in accordance with federal and provincial legislation is a responsibility of the self-employed RN. CNA *Code of Ethics for Registered Nurses*, federal and provincial legislation, as well as SRNA *Documentation: Guidelines for Registered Nurses* should be referenced to ensure information management and documentation requirements are met. Information management must be based on the following principles:

- confidentiality of client information,
- accurate record of services provided, including all steps of the nursing process,
- expected and actual outcomes of nursing service,
- documentation of client consent and/or agreed upon business contract, and
- appropriate storage, retention and authorized release of client information.

The onus is on the self-employed RN to become familiar with issues surrounding ownership and access to client records, and requirements arising through provincial and federal information management and privacy legislation as a trustee of client information. All confidential health records must be stored and physically secure 24 hours a day. The length of time records must be retained is dependent on the nature of the business and Saskatchewan legislation. Further information related to information management and privacy legislation is available in Appendix B - Resources.

Self-employed RNs must develop appropriate policies and procedures for all aspects of information management including the collection, storage, use and disclosure of personal health information. The Canadian Health Information Management Association (CHIMA) has position statements and guidelines that can be used for establishing policies and procedures for maintaining confidential client information (see Appendix B – Resources). Self-employed RNs must maintain accurate and complete client and financial records including obtaining informed consent prior to providing professional registered nursing services (CRNM, 2011). Disposal of health information, particularly when a business is terminated, must be done in congruence with provincial and federal privacy legislation. Consultation with a lawyer and accountant for professional advice relating to retention of business records is recommended.

Confidentiality

The current *Code of Ethics for Registered Nurses* identifies that confidentiality is a nursing value to be adhered to. It states, “Nurses recognize the importance of privacy and confidentiality and safeguard personal, family and community information obtained in the context of a professional relationship” (pg. 15). With regard to disclosing information it states, “When nurses are required to disclose information for a particular purpose, they disclose only the amount of information necessary for that purpose and inform only those necessary. They attempt to do so in ways that minimize any potential harm to the individual, family or community” (pg. 15). It is a client’s right to raise a complaint with the SRNA should they feel their confidentiality has been breached.

It is recommended that a consent for release of information be signed by the client and a record maintained of when and to whom any client information is sent. The Canadian Nurses Protective Society (CNPS) InfoLAW Bulletins are useful resources that provide detailed information relating to the issue of consent. These bulletins are available on the CNPS website (see Appendix B – Resources).

There may be exceptions to the obligation of maintaining the client’s right to confidentiality. Under certain circumstances disclosure of confidential information may be required. For instance, the law requires a RN to:

- report suspected child abuse,
- report certain communicable diseases,
- report gunshots and stabbings, and
- release information under the authority of a court order or in the course of legal proceedings.

Self-employed RNs must be aware of reporting responsibilities through the routine monitoring of changes to provincial and federal privacy legislation.

Quality Improvement and Risk Management

The self-employed RN must be committed to on-going evaluation to ensure the provision of safe and effective nursing services. Formal and informal evaluation feedback assists the self-employed RN to determine what services have been effective and how to meet evolving needs of clients (ICN, 2004). Self-employed RNs should develop support structures that allow discussion of personal and professional challenges and promote the sharing of information, experiences and ideas. Some examples include nursing interest groups and similar professional organizations on local, provincial and national levels. Self-employed RNs may find these resources through SRNA professional practice or special interest groups (e.g., SRNA Wound & Skin Care Special Interest Group) or at the national level through the Canadian Nurses Association. Lists of these groups are available on CNA and SRNA websites (see Appendix B – Resources).

Some quality improvement and risk management strategies for maintaining quality of practice include:

- development and adherence to policies and procedures related to the business,
- development, regular review and revision of policies and procedures related to the nursing practice,
- measurement of client care outcomes,
- regular feedback from customers and clients,
- consultation with peers and role models,
- a comprehensive information management system, and
- knowledge of and adherence to laws related to the business.

INSURANCE

Self-employed RNs should have appropriate insurance coverage and are responsible for investigating the level of liability risk associated with their nursing practice. This includes professional liability, general liability and vicarious liability for any employees. RNs who are engaged in self-employed practice while working as an employee elsewhere should be aware that their employer's insurance will only cover work activities within that particular environment (not the RN's self-employed practice). RNs practicing in these circumstances should ensure they have appropriate insurance coverage for the self-employed portion of their practice. See CNPS information below for more information.

Professional Liability Insurance

All RNs licensed with the SRNA receive professional liability through the Canadian Nurses Protective Society (CNPS). Eligibility criteria for CNPS protection is that the occurrence relates to the provision of professional nursing services recognized by their regulatory association. It is important to be clear that the service provided is a nursing service. This clarity can be obtained by completing a recognition of practice assessment referred to in this document. Self-employed RNs should evaluate the risks in their practice and consider whether additional liability protection is needed. These issues can be discussed with a CNPS Professional Liability Officer and/or a business lawyer. If additional professional liability protection is needed, the self-employed RN may purchase that coverage through an insurance broker. CNPS provides a program called *CNPS Plus*[®] that meets the additional insurance needs for self-employed RNs. Additional information, the information brochure or contact information can be obtained from the CNPS website www.cnps.ca.

Business Insurance

Self-employed RNs should carry appropriate business insurance. The type and amount of business insurance required will vary according to the:

- type of service offered,
- type of business structure (e.g., incorporated companies or partnerships require business insurance),
- location of business and service,
- number of employees, and
- amount of risk involved.

Business insurance is also recommended to cover potential claims from a client who is injured while on the owner's premises (property). Premise insurance covers the destruction of property or personal injury.

ADVERTISING

Self-employed RNs must also demonstrate ethical decision-making in the advertisement of their services. Responsible advertising is done in a manner that serves the interests of the public, pertains to activities within the scope of practice of the RN and does not claim or imply that the advertising RN or their services are superior over other RNs or health care professionals (ARNNL, 2011). The content in advertisements must be accurate, factual and verifiable, and must include the RN's name and designation [RN or RN(NP)]. Advertising may be through business cards, telephone directories, newspaper and magazine announcements and/or promotional items. Advertising content can include information such as description of services offered, nursing credentials, experience, fees and contact information (CNO, 2009a).

CONFLICT OF INTEREST

A RN who engages in self-employed practice and works as an employee in a health care organization needs to consider the ethical implications of engaging in both roles. Employer policies may require the RN to inform the employer of their self-employed practice. The RN with an actual or perceived conflict of interest should declare the details of the conflict when discussing options with the client. For example, a RN who works on an obstetrical unit may have a self-employed practice such as a lactation consultant and needs to inform clients that they can obtain support and information through a self-employed practice such as her own, through the lactation consultant at the public health unit, or through other resources that may be available in her particular community.

Endorsement

CNO (2009a, p.1) describes endorsement in the following way:

Endorsing or promoting a product or service is closely linked with conflict of interest. It may be considered a conflict of interest, and therefore professional misconduct, for a nurse to use her/his registration status to promote a personal interest in a commercial product or service. Endorsement occurs when a nurse uses her/his credentials to lend credibility to a commercial product, product line or service. A nurse cannot use her/his registration as an RN or RN(NP) to lead the public to believe she/he knows that one product is better than another, even if she/he believes it to be true. The endorsement of a product or service without providing information about other options could mislead the public and compromise trust.

Treating Family or Friends

Another example of a conflict of interest is when a situation arises where it is most appropriate, or even necessary, for a self-employed RN to provide services to a family member or close friend. Caution must be taken in these situations as providing care to a family member can make maintaining therapeutic nurse-client relationships difficult (CNO, 2009b). "To avoid the confusion of roles and the blurring of personal and professional boundaries, the self-employed RN is cautious, clarifies the nature of the relationship and carefully considers the impact of the dual role on the client, significant others and the RN" (CRNBC, 2006, pg. 12). Whenever possible, family members should be referred to another professional for treatment and ongoing care.

CONCLUSION

Self-employed RNs have an exciting opportunity to meet the unique needs of clients in a variety of health care settings. All RNs, including those in self-employed practice settings must adhere to standards of practice, competencies and code of ethics as determined by the SRNA. In order to use the protected titles 'RN' or 'RN(NP)', the self-employed RN must engage in approved professional registered nursing practice. An application for approval of nursing practice may be required after consultation with the SRNA Registrar. Self-employed RNs establish and maintain referral networks and expertise in their area of practice in order to best meet the current and evolving needs of the people of Saskatchewan. For additional information about self-employed registered nursing practice please contact the SRNA Practice Advisement Team by email nursingadvice@srna.org or by phone 1-800-267-9945 or in Regina, 359-4200.

REFERENCES

- Association of Registered Nurses of Newfoundland and Labrador (ARNNL). (2011). *Advertising Nursing Services Position Statement*. St. John's, NL: Author.
- Canadian Nurses Association (CNA). (2008). *Code of ethics for registered nurses*. Ottawa, ON: Author.
- Canadian Nurses Protective Society (CNPS). (1994). *Consent to treatment: The role of the nurse*. Ottawa, ON: Author.
- Canadian Nurses Protective Society (CNPS). (2009). *Consent for the incapable adult*. Ottawa, ON: Author.
- College and Association of Registered Nurses of Alberta (CARNA). (2010). *Self-Employment for Nurses: Position Statement and Guidelines*. Edmonton, AB: Author.
- College of Nurses of Ontario (CNO). (2009a). *Practice Guideline Independent Practice*. Toronto, ON: Author.
- College of Nurses of Ontario (CNO). (2009b). *Therapeutic Nurse-Client Relationship, Revised 2006*. Toronto, ON: Author.
- College of Registered Nurses of British Columbia (CRNBC). (2010). *Private Practice Checklist Guide for Self-Employed Registered Nurses and Nurse Practitioners*. Vancouver, BC: Author.
- College of Registered Nurses of British Columbia (CRNBC). (2006). *Nurse-Client Relationships*. Vancouver, BC: Author.
- College of Registered Nurses of Manitoba (CRNM). (2011). About Self-Employed Practice. *RN Journal*, 36(3), 14-16.
- Government of Saskatchewan. (1988). *The Registered Nurses Act, 1988*. Regina, SK: Author.
- International Council of Nurses (ICN). (2004). *Guidelines on the Nurse Entrepreneur Providing Nursing Services*. Geneva, Switzerland: Author.

- Nursing Association of New Brunswick (NANB). (2008). *Self-Employed Nurses Position Statement*. Fredericton, NB: Author.
- Saskatchewan Registered Nurses' Association (SRNA). (2003). *Clinical Expectations for RN(NP)s*. Regina, SK: Author. Under review.
- Saskatchewan Registered Nurses' Association (SRNA). (2007). *Standards and Foundation Competencies for the Practice of Registered Nurses*. Regina, SK: Author.
- Saskatchewan Registered Nurses' Association (SRNA). (2011). *Registered Nurse (Nurse Practitioner) RN(NP) Standards and Core Competencies*. Regina, SK: Author.
- Saskatchewan Registered Nurses' Association (SRNA). (2011). *Documentation: Guidelines for Registered Nurses*. Regina, SK: Author.
- Shirley, M. R. (2007). An evidence-based understanding of entrepreneurship in nursing. *Clinical Nurse Specialist*, 21(5), 234-240.

APPENDIX A - GETTING STARTED

Deciding to start a self-employed nursing practice is an important decision. Invest your time wisely in research and planning before starting to ensure success. When considering self-employment, the following steps are provided for your consideration but are not inclusive:

1. Contact the SRNA to receive recognition of practice documents which outline the process for having your practice approved by the Registrar.
2. Analyze your own resources prior to making a business commitment. Decide how much time, energy and money you are willing to invest in your practice. Working part-time and initiating your self-employed practice on a part-time basis may provide you with a steady income and benefits if these are required. This may also limit your initial risk and liability.
3. Talk about your proposed business with prospective clients and referral sources. Ask candid questions. Is the service needed? Will clients pay? Consider using an analysis tool such as a SWOT analysis: What are my strengths? Weaknesses? Opportunities? Threats?
4. Learn basic business skills such as basic bookkeeping, credit arranging and lease/contract analysis, which are useful and can save money. Many local continuing education programs offer courses for new business owners.
5. Keep all invoices, receipts and bills, car expenses and costs incurred in the research and development phase. These are the basis for your business audits and income tax reports.
6. Develop a referral network. Word of mouth advertising is only one source of clients. You will have to develop and maintain contacts within the health care community.
7. Contact your municipal government to determine if a business license is required.
8. Contact the Canadian Nurses Protective Society to discuss issues related to independent practice, professional liability, and CNPS protection and services.
9. Investigate and determine with your own legal counsel the advantage and disadvantages of various types of business structures and your liability protection needs.
10. Consult with an accountant about the tax implications of the various business structures and other tax related issues.
11. Consult with an insurance specialist about your additional insurance needs.
12. Consult with the Saskatchewan Workers' Compensation Board for requirements.
13. RNs in self-employed practice who hire employees must adhere to the Labour Standards Act and develop policies, procedures, and standards for human resource management, handling of client concerns, supervision of staff, and quality of care.

14. Several federal and provincial regulations apply to self-employed businesses. The Canada-Saskatchewan Business Service Centre can provide guidance regarding these regulations. The contact number is 1-800-667-4374. Business owners have the responsibility to be aware of Government Acts that apply to businesses, such as Business Corporations Act, Education Health & Tax Act, Labour Standards Act, Saskatchewan Human Rights Code, Workers Compensation Act, Income Tax Act, Employment Insurance Act, Goods & Services Act, etc. (*Adapted from Women Entrepreneurs of Saskatchewan Inc. Start-up Kit (p. 15) www.womenentrepreneurs.sk.ca privacy legislation*).
15. Additional information can be obtained from the local office of the Women's Entrepreneurs of Saskatchewan Inc. Please contact their local office in your area or the website: <http://www.womenentrepreneurs.sk.ca>.

Consultations to consider:

- SRNA – Registrar
- SRNA – Nursing Practice Advisors
- Canadian Nurses Protective Society (CNPS)
- Banker
- Lawyer
- Accountant
- Insurance Broker
- Local Colleges/Continuing Education Providers for Business Related Courses

APPENDIX B – WEB RESOURCES

Resource	Web Site*
Canada Business Network Services for Entrepreneurs	http://www.canadabusiness.ca
Canada Revenue Agency	http://www.cra-arc.gc.ca/
Canadian Code of Advertising Standards	http://www.adstandards.com/en/standards/thecode.aspx
Canadian Health Information Management Association	https://www.echima.ca/
Canadian Nurses Association	http://www.cna-aiic.ca
Canadian Nurses Association <i>Code of Ethics for Nursing</i>	http://www2.cna-aiic.ca/CNA/documents/pdf/publications/Code_of_Ethics_2008_e.pdf
Canadian Nurses Protective Society	http://www.cnps.ca
GST Registration	http://www.gst-tax.com/?gclid=CO_f8N3C2bACFeED_QAodKymwzA
Health Information Protection Act: <ul style="list-style-type: none"> • Saskatchewan Information and Privacy Commissioner • Saskatchewan Health 	www.oipc.sk.ca www.health.gov.sk.ca/ph_br_health-leg-hipamain.html
Industry Canada	http://www.ic.gc.ca
Information Services Corporation	http://www.isc.ca/Pages/default.aspx
National Nurses in Business Association Inc.	www.nnba.net
Office of the Saskatchewan Information and Privacy Commissioner	http://www.oipc.sk.ca
Office of the Privacy Commissioner of Canada.	http://www.privcom.gc.ca

Resource	Web Site*
Personal Information Protection and Electronic Documents Act:	
<ul style="list-style-type: none"> • Privacy Commission of Canada • For small business • For all health sectors • For all organizations 	<ul style="list-style-type: none"> www.privcom.gc.ca http://privacyforbusiness.ic.gc.ca http://stratgis.ic.gc.ca/privacy/health http://privcom.gc.ca/information/guide_e.asp
Saskatchewan Registered Nurses' Association	http://www.srna.org
Saskatchewan Workers' Compensation Board	http://www.wcbsask.com

* Links current as of publication.

* Note: Links current as of publication date

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