

# 2014 Annual Report

Creating Positive Change





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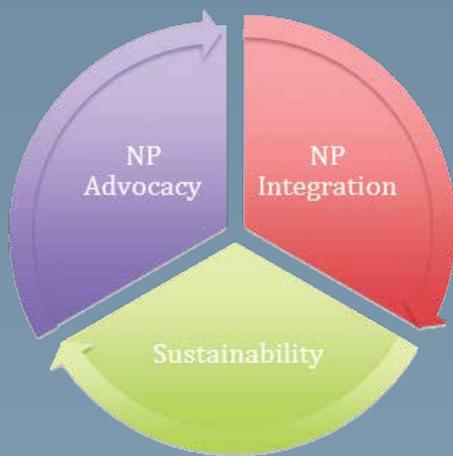
# President's Message

Dear Nurse Practitioner Colleagues:

The 2013/2014 year has been eventful year, one which would not have been possible without the support and assistance of many dedicated Nurse Practitioners from around the province. I would like to take this opportunity to thank the BCNPA Executive for their commitment, support and dedication to Nurse Practitioners in B.C.

BCNPA set three goals to work on over five years (2012-2017):

- 1) ensuring a sustainable business model for BCNPA,
- 2) strengthening the Influence of NPs on health in B.C. and
- 3) contributing to complete integration of NPs into B.C.'s healthcare system.



Highlights of this work include engaging stakeholders that impact NP integration and exploring how to better work with stakeholders to advance and support the integration of Nurse Practitioners into B.C.'s health system. The BCNPA contracted with Valerie St. John of Envision Consulting to lead this work and provide next steps for further discussion and planning.

The BCNPA was challenged by government this year with a budget and service plan that put Nurse Practitioners in jeopardy. However, BCNPA took an assertive approach and was successful in challenging and seeking a formal amendment to the government's plan. Advocacy for our profession is often challenging, as political action seems unfamiliar to many nurses. Nevertheless, the nursing community quickly came together from around the province to develop and support a plan of action for Nurse Practitioners. As a result of our efforts we have established our position with government, and have established a collaborative relationship that should help us further our integration and influence in health planning.

BCNPA and CRNBC's worked together to enable BCNPA to communicate with all NP's in the province. This allows us to share professional development and research opportunities as well as government relations updates. We look forward to strengthening

our collaborative relationship with CRNBC as we continue to address health policy decisions that impact NP practice.

As part of being a sustainable organization, this year BCNPA explored opportunities for grants and bursaries. More work is to come as we continue to look for creative ways to fund our organization. Without support from members and revenue from our conference this organization would not be sustainable and I am grateful for your ongoing commitment. For those who aren't members, I encourage you to consider the benefits that come with engaging in BCNPA. As the professional voice for Nurse Practitioners we want to hear and support all NPs in the province. Become involved - there is strength in unity.

BCNPA chose to hold its annual conference in Victoria, B.C. this year. The commitment and hard work of the conference committee is truly evident in this year's inspiring program of speakers and workshops. I look forward to an engaging and enlightening experience for all participants.

On a personal note, it has been a great privilege to represent BC Nurse Practitioners and witness the strength, unity and influence of our association. As President of the Board, I was able to meet with Minister Lake on two occasions to advocate for NP participation in developing and implementing healthy public policy. Other opportunities included meetings with ARNBC, the Chief Nursing Officer's Council, Divisions of Family Practice and engaging media through press releases, opinion editorials and interviews. A historical event for BCNPA and nursing occurred on May 12, 2014 when nurses from all classes (RN, NP, LPN, RPN) came together to meet with the health minister and signal our commitment to ongoing collaboration and engagement. This was a proud moment, and I hope we will continue to nurture these relationships and opportunities.

Thank you for the opportunity to serve as President of BCNPA. NPs represent an amazing opportunity to improve the health and well-being of British Columbians and I am confident that B.C. Nurse Practitioners will continue to have a strong professional and collaborative voice for nursing and healthcare.

Yours sincerely



**Stan Marchuk**  
2013-14 President



# President Elect's Message

This past year has been an exciting and challenging time to be a nurse practitioner in British Columbia and even more so to be involved with BCNPA.

The executive team has worked hard all year to continue to build on the work done by past BCNPA leadership in growing and expanding the Association, meeting the needs of its members and responding to current events. While some of our work is done in public (i.e., the Town Hall Meeting, participation in the Vancouver Pride Parade, e-mail blasts and communications, our website and social media), much of the work occurs behind the scenes with strategic planning, committee work and stakeholder relations.

This year, executive members have focused on restructuring several committees to better align them with our goals, expanding our membership base and considering new funding opportunities. We have continued to work closely with ARNBC, CRNBC and the provincial CNOs to promote and seek support for NP issues. One of our current goals is to gather stories and challenges that NPs across the province are facing. These stories will play an important role in helping BCNPA express the seriousness of the challenges facing nurse practitioners in the province.

While there have been some successes in raising our profile and having our concerns addressed there is much work still to be done. This work is going to require decisions to be made about the organization's structure and future direction, along with changes to some executive roles. On behalf of the executive, I urge you to stay informed and get involved.

**Donna Nicholson**  
2013-14 President-Elect



# Member Profile

**Deborah Lowe, BScN, MN, NP(F)**  
Northern Health

I am a family NP who has been practicing in the small northern town of Hazelton, B.C. for the past two years. I live here with my wife and my new puppy Lulu, having graduated from Athabasca University with my MN-NP in 2012.

Hazelton is a beautiful town in the north central area of the province that is ringed by mountains and surrounded by lakes and rivers. The town serves six nearby Aboriginal reserves and my patient population is 85 percent Aboriginal. I work in family practice with five physicians in the small clinic that is attached to the hospital. I also work one day each week on a reserve 75 kilometres away. I have a very varied practice and see patients throughout their lifespan, including quite a lot of prenatal care. I am lucky to have a very collegial and collaborative practice with my physician colleagues and I have great administrative supportive as well.

I love my job as it is varied and challenging with a good mixture of acute and chronic presentations as well as quite a few sexual health visits. I feel very supported and valued in my role as an NP here and have had very few barriers to practice that some of my NP colleagues face on a daily basis.

In Hazelton I love to garden, hike, run, and cross country ski. I grew up in nearby Smithers and I feel so lucky to live and work here in the north. I am also excited and hopeful that my practice will continue to expand as barriers to practice are lifted in coming years.



# Financials

Our financial development as an Association has continued to grow throughout the 2013 budget year. This year the executive approved a change to our fiscal year to reflect the calendar year. The rationale for this change is to simplify our bookkeeping processes by spacing out time between registration renewal, fiscal year end, and conference registration. Therefore, our last fiscal year consists of only three quarters.

BCNPA continues to use an electronic platform for bookkeeping transactions. As well, we are work directly with a bookkeeper to assist with financial record and transaction management.

With the assistance of Loen and Company, BCNPA has filed T2 corporation income tax returns for 2006 to 2013. This allows us to collect GST credit annually. Therefore, we are now formally recording GST payment on any taxable expenses.

Note: Loen and Company has prepared our financial statements from information provided. These statements are available to members on the BCNPA website. Statements prepared represent an unaudited Notice to Reader. The current year represented is from April 1, 2013 to December 31, 2013.

**Ranjit Lehal**  
2013-14 Treasurer



# Secretary's Report

The secretarial role is one of receiving and replying to emails, supporting the executive direction and supporting the membership initiation and renewal processes.

There has been a steady flow of emails with an overall increase in volume over the last year. By far, the most common requests are from members of the public looking for a nurse practitioner to be their primary health care provider. Region by region, the number of these requests were:

Fraser Health: 48

Vancouver: 36

Vancouver Island: 17

Interior: 13

North: 2

Regional representatives have been very helpful in trying to link up these public requests for NPs where they can, but we do recognize that more work needs to be done to solutions need to be considered that will enable the public to find nurse practitioners more effortlessly. This will be an ongoing discussion with the 2014/15 Executive.

Other requests were from prospective employers requesting job postings on our website or seeking information on how to fund nurse practitioner positions; requests for NP participation in research projects; queries about the educational process in becoming a nurse practitioner; or job opportunities and registration processes for non-B.C. registered NPs.

**Elley Ayer**  
2013-14 Secretary



# Member Profile

## **Nancy Wright, MN, NP(F)**

### **Vancouver Island**

Before I started nurse practitioner studies at UNBC I was teaching part-time at the University of Victoria in the undergraduate nursing program. I missed working with patients even though I loved working with students. When the opportunity arose to go back to school to become a nurse practitioner, I jumped at the chance.

When I completed my studies and became registered with CRNBC, the NP jobs in Victoria had dried up. While trying to figure out what to do, I complained a lot (thank you to those who listened) and continued working part-time at UVic teaching in the NP program. Eventually some opportunities came along that were outside the public system, in private health care. My first part-time NP job is working at Live Young Medical Services, a private clinic that focuses on age-management. I work with a physician who leads the operations of the clinic. My work here is not to full scope, but I enjoy the practice area, women of all ages (although we focus on menopausal and perimenopausal), and men as well. I help with doing physical exams, ordering/reviewing lab tests, adjusting medication doses, writing prescriptions and communicating with patients either by phone, email, or in person. I really enjoy this work as I regularly have patients who tell me how wonderful they feel compared to before they came to the clinic. We see women who are having a very difficult time transitioning through menopause, and have not been helped by their family doctors.

Shortly after, I started working at the Victoria office of Travel Medicine & Vaccination Centre. This work is also part-time, and I work to full scope although it's a very narrow and perhaps specialized wedge of the health care pie. I see people who are travelling to (mostly) exotic destinations who are seeking travel advice on risks and vaccinations. I perform comprehensive risk assessments for patients across the life span based on their past and current health and immunization history, travel destination, length of travel, planned activities and accommodations, and personal risk factors. Within the parameters of general health, I'm able to determine the right immunizations and medications needed to manage risk for patients travelling out of the country. I have travelled through Europe, Africa, Asia and Central America, so this work brings back memories and helps inform my practice. I also love travelling vicariously through my patients!

In 2012 I realized that working three part-time jobs was more than enough, and I resigned my teaching position at UVic. I was happily called back this past winter to teach two distance courses in the NP program when the need arose, and I expect I will return to teaching again when the need is there.

Being part of BCNPA is incredibly important to me. It helps me stay connected with other NPs around the province and be up-to-date on changes related to NP practice. I also appreciate the advocacy and support I receive by being a BCNPA member.



# Governance 2013-14

President	Stan Marchuk
President-Elect	Donna Nicholson
Past President	Rosemary Graham
Secretary	Ellen Ayer
Treasurer	Ranjit Lehal
Regional Representative: Fraser	Carrie Murphy
Regional Representative: Interior	Natalie Manhard
Regional Representative: North	Beth Berlin
Regional Representative: Van Coastal	Wendy Bowles
Regional Representative: Van Island	Coleen Heenan
Student Representative	Lisa Orlandi
Media Relations Officer	Esther Sangster-Gormley
Communications Director	Andrea Burton



# Student Report

One of the main challenges addressed by students this year was obtaining the required clinical placement hours to meet curriculum requirement for their university. Clinical placements for UBC students are provided each semester to ensure clinical hours are met, but UVIC and Athabasca students, in particular, are challenged to find their own NP clinical placements. The student committee spent considerable time discussing these challenges, and making recommendations to the BCNPA Executive for the future. We also discussed the need to provide ways for the public to 'find' an NP in their community, something which the BCNPA Executive continues to look at.

OSCE preparation is another unanimous concern for students. The student committee has considered a number of suggestions and recommendations that would support NP students in their preparation, and have put these forward to the Executive. The student committee has also requested further discussion around whether BCNPA could support job interview preparation questions on the BCNPA website to help students and NPs prepare for job interviews.

The student committee, consisting of five students, one from each institution, continues to meet together to raise issues that are important to students and will also help to advance the goals of the BCNPA.

**Lisa Orlandi**  
2013-14 Student Representative



# Member Profile

**Liz Gilmour, BScN, MN, NP(F)**  
Vancouver Island

I initially became interested in becoming a nurse practitioner while I was working as an RN in the emergency department in Nanaimo. Our hospital was the second busiest emergency department in B.C. and we were continually pushed beyond our limits. I loved the diversity of clinical presentations in this challenging environment but always felt I wanted to do more; spend a bit more time with patients to gain a better understanding of their needs. I wanted to explore how I could partner with patients and support them in making informed decisions and live healthier lives.

I began my career as a nurse practitioner in Seniors Health in Nanaimo with the Seniors Outreach Team. I feel so fortunate to have been part of this team of nurse clinicians, occupational therapists, social workers and a geriatric psychiatrist, who remain among the most dedicated and hard working professionals I have ever met. They set the bar high! The value of this comprehensive perspective and shared care approach was evident each and every day as the complex chronicity of the elderly population we served was managed. I soon realized that there is no such thing as being too thorough. I also learned more from my patients than they ever learned from me. What a great starting place this was for me as I began my new career.

I took the road less travelled when the opportunity came to work in Urgent Care/Primary Care at Oceanside Health Centre. Oceanside embraces an integrated model of care that includes services and resources designed to support patients to live healthier and independent lives. We strive to identify each patient's unique needs and connect with identified services for episodic illness diagnosis and treatment, chronic disease management and ongoing wellness. This unique and innovative health centre has yet to have its first anniversary.

I have now been a nurse practitioner at Oceanside Health Centre's Urgent Care for five months. There have been significant challenges both in role definition and collaboration that have required flexibility and robust dialogue in order to set boundaries and promote supportive relationships. I have been very fortunate to have the opportunity to bend the ear of Rosemary Graham, our sage nurse practitioner in primary care, and Dr. Marlene VanderWayde, our incredible primary care physician. They are a strong primary care team and have been an invaluable resource at Oceanside. There were days when they allowed me to vent the fears and frustrations from facing a steep learning curve.

I am working to the full scope of my practice and building trusting relationships within the integrated team at Oceanside Health Centre; this is a diverse and comprehensive Team that includes nurses, physicians, nurse practitioners, social workers, a behavioural therapist, wound care team, mental health and addictions, home and community care, as well as management. It is magical when the opportunity arises and unique connections are made with this team that make a dramatic difference to the patient's experience.



# Communications Committee

The Communications Committee began this year with three important goals in mind:

- 1) To work with the Web Ops Committee to streamline the website, revise content and improve navigation in order to make the website more user-friendly and to meet the needs of members and the public.
- 2) To revise and revamp existing BCNPA materials, such as the brochure, with updated language and information and to consolidate language used in letters, fact sheets, briefing notes and other documentation.
- 3) To respond quickly and efficiently to key issues as they develop.

Throughout the year, we have worked closely with the Web Ops committee to make key changes to the BCNPA website. Members and others have made recommendations that will use the existing platform, and many of the same tabs, but will simplify navigation and reduce unnecessary content. In March, the Executive agreed that the existing Web Ops Committee would become part of the Communications Committee and beginning in June 2014, website development and maintenance will become a function of communications.

The Communications Committee has been developing a new brochure for use by NPs and other healthcare professionals. One of our goals was to develop one consistent definition of nurse practitioner that can be used on all of our marketing materials and our website. The new definition was finalized and approved by the Executive in March.

Throughout the course of the fall, the BCNPA became increasingly more aware that after nearly 10 years of the profession in B.C., some members of government and the health authorities were questioning the value and impact of nurse practitioners in the province. In response, BCNPA launched an aggressive campaign designed to remind government, other healthcare providers and the public of the value of nurse practitioners. Response has been positive, and we have had a number of key meetings with government, stakeholders and others that have helped to move the BCNPA agenda forward.

Many of the projects started by the Communications Committee are long-term and will continue to move forward into the next year of the organization.

**Andrea Burton**  
Communications Director

# Conference Planning Committee

The 2014 Conference Planning Committee is a dedicated and enthusiastic group of NPs who are excited to bring the conference to Vancouver Island for the first time. Knowing that moving the venue away from the Lower Mainland would be a big undertaking, the committee formed in the early spring of 2013 to give us extra time to choose and secure a venue. The 2013 Conference Planning co-chairs have been an important resource throughout the planning process, and continue to kindly answer our questions and provide guidance. They handed over complete documents that served as planning templates for this year's conference, as well as a recommended timeline for the process that has guided us in getting tasks completed on schedule.

Our 2014 theme, Nurse Practitioners: Access, Innovations & Outcomes integrates the BCNPA Vision and Mission Statement for Nurse Practitioners in BC and the Canadian Nurses Association Position Statement on Nurse Practitioners, reflecting the accessible, efficient, and effective health care provided by NPs in British Columbia, meeting the highest standards of practice. The Conference Planning Committee has worked hard to develop a program of workshops, plenary, and breakout session speakers for the 2014 BCNPA AGM and Conference.

**Jo Rippin & Janice Brown**  
Co-Chairs, 2014 Conference Planning Committee

# Member Profile

## **Sue Lawrence, BScN, MN, NP(F)**

### **Fraser Region**

My name is Sue Lawrence. I have been a family nurse practitioner since 2008. Currently I work in the rural part of Fraser Health Authority: Agassiz, Hope and Boston Bar. I have a varied practice which makes my job very interesting and enjoyable. I never know what my day will really be like. When I became an NP I hoped for work where I would be able to help people who did not have an easy time navigating the health care system and who needed someone to look past the initial presenting concerns to how their social, economic, emotional, environmental factors were also affecting their health.

I mostly work in Hope in a private physician office with five other doctors and another NP. I have my own roster of patients with ages from newborn to my oldest patient who is 73 years old. One of my goals is filling the gaps in primary health care. In Hope there is a shortage of health care providers, so there are always more demands for health care. So one day a week I work at Open Access which is like a drop in clinic but the patients are guaranteed some follow up from me if it is needed.

I also provide health care for youth. While there is an RN-run youth clinic in town, many of the youth I see have complex social emotional and physical needs. Many of the high risk youth do not quickly seek out health care on their own, so I do outreach in Agassiz and Hope. I do presentations on healthy sexual relationships, assault prevention, porn literacy (a set of skills that people need to decode and manage the porn in their lives), internet safety and media influences on sexuality and self esteem. I go to the high schools and the alternative schools so youth get to know me a bit and this helps them feel safe coming to get care from me.

Another aspect of my work is outreach to marginalized populations like the homeless, First Nations people and people with mental health concerns. Once a month I spend a morning at Hope's homeless shelter. Many of the residents here feel unwelcome at the regular clinic – either because in the past they have been “banned” for their anger outbursts (often due to miscommunication or drug use) or because they are afraid of being judged when they show up without clean clothes after sleeping in the bush for weeks. However at heart most of them are very approachable gentle people who just live on the very outskirts of society. I also provide care to any unattached people who end up at Hope Mental Health and don't know where to go for primary care health needs. In a community where all the physicians are not accepting any patients it is a very daunting task to find health care for anyone but even more so for people who are marginalized.

Two to three times a week I travel up the Fraser Canyon to Boston Bar to work at a clinic with another NP or physician. We work in a clinic that was set up by the First Nations community (Andersen Creek) with funding for supplies provided by Fraser Health. The people of Boston Bar also come for care even though most of them are not part of the First Nations community. There is very little employment in these communities so I really see poverty effected health in the people coming for care. Again I think that as a NP I am well suited to working here because NPs are trained well to provide holistic contextualized health care.



# Membership Committee

Membership is critical to the sustainability of BCNPA in order to maintain credibility as the professional voice for BC's NPs with Government, Health Authorities, CRNBC, BCMA and other stakeholders. As well, membership dues and conference fees are the primary sources of revenue for this volunteer run, non-profit association. Accordingly, the BCNPA Membership committee was renewed this year and it was determined that a member of the BCNPA executive should co-chair the membership committee. A revised Terms of Reference was approved by the executive in January 2014.

The executive gave the membership committee direction to achieve a 60% rate of membership.

## Goal and objectives for 2013-2014:

**1. Increase percentage of practicing NPs in BC who are BCNPA members to 60%.**

This goal may not be attainable in 2013/14, but we are currently at approximately 43%, and will continue to develop membership structure and aim for 60% over the next year.

**2. Develop marketing/engagement/membership campaign for April May 2014.**

**3. Engage the student sub-committee.**

The committee noted that support for students in programs outside BC (U of T, Athabasca) to prepare for OSCE and registration would be a good incentive.

**4. Improve member volunteer engagement.**

Develop processes for volunteer engagement and management. Letter to welcome volunteers and questionnaire to get more specific information re what volunteers can/want to do has been developed.

# Professional Development Committee

The Professional development committee was established by the Executive to realign professional development support. The committee's work focuses on exploring mentorship and research opportunities as well as practice support and continuing education for Nurse Practitioners.

Composed of members from urban and rural areas, and having expertise in primary and specialized practice, research and education, the Committee has established foundational objectives and has started to look at mentorship support for Nurse Practitioners. As an organization we are challenged with having limited resources to embark on and deliver these supports, however as we go forward we will look to explore avenues for professional development supports.

Much of the work of this committee is long-term, and will continue to evolve and move forward in the coming years.

## **Stan Marchuk**

**Chair, Professional Development Committee**

# Web Operations Team 2013/2014

The Web Operations team's mandate is to develop and maintain a web based platform that supports the BCNPA's operational and communication needs. Collaborating with all BCNPA committees and taking direction from the BCNPA Executive, the work this year has continued to focus on five key themes including upgrades to overall website design layout ([www.bcnpa.org](http://www.bcnpa.org)), membership record keeping, managing email traffic ([info@bcnpa.org](mailto:info@bcnpa.org)), content and looking forward to meet the emerging web needs of the Association within an assigned fiscal budget.

The nuts and bolts of the work over the past year has included major content reorganization, new layout and navigation features, maintaining accurate membership statistics, revising on-line forms, and working with members to provide streamline access to website features.

At the end of the 2013-14 year, the BCNPA Executive opted to merge the Web Ops Committee into the Communications Committee. We appreciate the good work that so many have done to support Web Operations over the past few years, and look forward to continued website improvements with the newly merged committee.

**Lorine Scott**  
Chair, 2013-14 Web Operations Team

# BCNPA Goals Actions Directions 2013/2014

Goal	Action	Strategic Directions from Executive Committee
1. Ensure sustainable business model for BCNPA	Seek Funding	<ul style="list-style-type: none"> <li>• Research operational funding options (grants, foundations, government, etc.) and bring potential funding opportunities to Board</li> <li>• Assist in writing proposals, grants, etc.</li> <li>• Negotiate support options with ARNBC (i.e., professional practice support person for NPs)</li> <li>• Investigate and report on revenue generating possibilities (sales, advertising, conference)</li> <li>• Endowments /Donations – investigate options and legalities</li> <li>• Provide and expand Insurance for NPs</li> </ul>
	Support and Grow Membership	<ul style="list-style-type: none"> <li>• Work towards providing insurance</li> <li>• Negotiate NP Practice Support Person within ARNBC</li> <li>• Research practice support options (ie, legal) for NPs and develop public resource list</li> <li>• Establish Outstanding NP Award</li> <li>• Contract HR person to research terms and conditions of NP employment and provide recommendations for developing HR resource position (work with HAs, HEABC, NPs)</li> </ul>
	Develop Infrastructure	<ul style="list-style-type: none"> <li>• Network with existing Associations who have similar needs – membership, insurance (ie, BCDHA, BCMTA, BCMA)</li> <li>• Build a process to manage volunteers</li> <li>• Develop business plan and budget</li> <li>• Review and update media strategy</li> </ul>
2. Strengthen influence of NPs on health in BC	Government relations strategy	<ul style="list-style-type: none"> <li>• Establish process contributing to provincial discussion in four key files</li> <li>• Monitor current activities in specific files, and provide advice to Executive for required briefing notes, government responses, committees, etc.</li> <li>• Target and establish relationships with specific stakeholders (particularly in four priority areas) to facilitate NP participation at policy tables and on committees</li> </ul>
	Advocate for increased NP and interprofessional leadership	<ul style="list-style-type: none"> <li>• Offer to lead collaborative task force on NP leadership and work with Ministry on funding pilot project</li> <li>• Identify, build on and maintain existing relationships with stakeholders</li> <li>• Work with partner associations to develop an association of associations that will influence interprofessional collaboration and provide multiple viewpoints for policy development within the Ministry</li> </ul>

Goal	Action	Strategic Directions from Executive Committee
	Increase awareness of NPs in BC	<ul style="list-style-type: none"> <li>• Develop tools and materials to help NPs to become more involved in divisions of family practice in their community</li> <li>• Implement and update communications strategy, external and internal to members as well as executive to committees (key messages, newsletter, e-blasts)</li> </ul>
3. Contribute to complete integration of NPs into BC healthcare	Model collaborative relationships with other health organizations	<ul style="list-style-type: none"> <li>• Active role in developing Association of Associations</li> <li>• Engage in ARNBC/CRNBC Transition Steering Committee, Insurance Sub-Committee and Awards Committee</li> </ul>
	Establish Sustainable funding for NPs and interprofessional teams in B.C.	<ul style="list-style-type: none"> <li>• Offer to work with ministry and key stakeholders to evaluate and recommend funding options for NPs.</li> <li>• Establish NPs as essential healthcare professionals through communications, practice tools.</li> </ul>





[www.bcnpa.org](http://www.bcnpa.org)

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Practitioner Association (BCNPA)

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