

CNO COLLEGE OF NURSES OF ONTARIO
OTO ORDRE DES INFIRMIÈRES ET INFIRMIERS DE L'ONTARIO THE STANDARD OF CARE.

Registering with CNO
 Teleconference Series 2009

Jen Law, RPN, RN, BScN
 Education Consultant

Elana Ptack, RN, MN
 Education Consultant

Outline

- Four Components of Self-Regulation
- Entry to Practice & Registration
- National Exam
- Temporary Registration
- Q & A

- 2 -

CNO Regulates Nursing by...

Setting Criteria for Becoming a Nurse in Ontario

Establishing Standards

Administering QA Program

Enforcement of Standards of Practice & Conduct

- 3 -

Entry-to-Practice & Registration

- Program Requirements
- Entry-to-Practice Competencies
- Evidence of Safe Practice
- CPIC
- National Exam

THE ASSOCIATION OF REGISTERED NURSES
THE ASSOCIATION OF REGISTERED NURSES - 4 - THE ASSOCIATION OF REGISTERED NURSES

National Exam

- ASI/CNA Development Process
- CNO Role
- Exam Format
- Study Tools

THE ASSOCIATION OF REGISTERED NURSES
THE ASSOCIATION OF REGISTERED NURSES - 5 - THE ASSOCIATION OF REGISTERED NURSES

Temporary Registration

- Enables members of either category (RN or RPN) to practice until they register in the General Class
- Must have met all registration requirements except successful completion of the national examination
- Limited to six months

THE ASSOCIATION OF REGISTERED NURSES
THE ASSOCIATION OF REGISTERED NURSES - 6 - THE ASSOCIATION OF REGISTERED NURSES

Temporary Registration

- Must submit application form and fee for General Class registration
- Must graduate from an approved nursing program within one year immediately preceding the date of application for registration
- Must ensure that CNO receives Verification of Course Completion (VCC) directly from the school confirming program completion

© 2014 CNO. All rights reserved. | THE BOARD OF COUNCILORS

Temporary Registration Application

- Section 1: completed by approved prospective employer(s)
- Section 2: completed by applicant
- All required documents must be received with the temporary registration application form and fee

© 2014 CNO. All rights reserved. | THE BOARD OF COUNCILORS


Thank you for your participation!



We would greatly appreciate hearing your feedback about this teleconference.

Please complete an evaluation form, which can be found in the Students section of the CNO website www.cno.org

© 2014 CNO. All rights reserved. | THE BOARD OF COUNCILORS

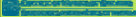

Questions or Comments




- 10 -


Resources

- **Practice Line:** Toll free in Ontario 1-800-387-5526 ext 6397 or 416-928-0900 ext 6397
- **Website:** www.cno.org
- **Publications & Resources:** (on-line)
 - Compendium & E-learning Modules
 - RN & RPN Entry-to-Practice Competencies
 - Practice Standards & Guidelines Documents
 - Preparing to Write RN and RPN Exam - Fact Sheet
 - Temporary Registration - Fact Sheet
 - The Standard (*quarterly magazine*)
- **Email:** entrytopractice@cnomail.org


- 11 -


Teleconference Feedback Form

Thank you for participating in the *Registering with the College of Nurses of Ontario* teleconference on February 5th 2009. Please take a few minutes to complete this feedback form. Your feedback is appreciated and will help us improve our process!

You can also complete this form online at http://www.cno.org/prac/learn/teleconferences/etp/etp_20090205.htm

Please indicate your level of satisfaction with each of the following:	Very Satisfied	Satisfied	Dissatisfied	Very Dissatisfied
a) Time for participant discussion.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
b) Time for College input.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
c) Discussion content.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
d) Handling of participant questions.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
e) Overall satisfaction.....	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

	Very Much	Somewhat	Not Really	Not at all
To what extent did the teleconference help you understand the process of registering with the College?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

	Very Much	Somewhat	Not Really	Not at all
To what extent did the teleconference increase your knowledge about nursing in Ontario?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Comments:				

What other topics would you like to see discussed in the College's teleconferences?

What would you do to improve the next College teleconference?

	Yes	No
Would you participate in another College teleconference?	<input type="checkbox"/>	<input type="checkbox"/>

Other comments:

Your current status:

PN Student

BScN Student

Faculty

Other (Specify):

Your organization:

College

University

Other (Specify):

Thank you for your feedback. Please send the completed form as an e-mail attachment to Judith Martin at jmartin@cnomail.org or print and fax to **416 928-9643** (attn: Judith Martin) by **February 12th, 2009.**