

**Draft Bylaws for Consultation: Nursing and Midwifery  
May 21, 2026**

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## 1. DEFINITIONS

1.1 Subject to Bylaw 1.2, all words used in these bylaws that are defined in the *Act*, *General Regulations*, or *Nursing and Midwifery Regulations* have the same meaning as set out in those enactments.

1.2 In these Bylaws, unless the context otherwise requires:

“Board” means the Initial Board and any Subsequent Board, unless the Initial Board or a Subsequent Board is specifically identified;

“Board Code of Conduct” means the Code approved by the Board governing the conduct of Board members;

“Board and Committee Recruitment and Appointment Policy” means a policy approved by the Board governing the recruitment and appointment of Subsequent Board members and Committee members;

“Chair” means the Chair of the Initial Board or the Chair of any Subsequent Board, as the context requires;

“date of migration” means the date when the *Midwifery Act* and the *Nursing Act* are repealed;

“General Regulations” means the *Regulated Health Professions General Regulations* passed by the Governor in Council pursuant to the *Act*;

“good standing” for purposes of appointment as a registrant Board or committee member means a registrant who:

- (i) holds a practising licence or a conditional licence, unless there is a condition on the licence restricting the registrant from eligibility to serve on the Board or a committee;
- (ii) does not owe any outstanding fees or costs to the Regulator; and
- (iii) is not subject to any licensing sanction or ongoing regulatory process that in the opinion of the Board, impacts their ability to ethically and competently serve as a member of the Board or a committee, or would otherwise be contrary to the objects of the Regulator;

“Initial Board” means the Board of the Regulator jointly appointed by the Legacy Boards prior to the date of migration;

“Legacy Boards” means the Board of the Nova Scotia College of Nursing and the Council of the Midwifery Regulatory Council of Nova Scotia in place immediately prior to the date of migration;

“*Nursing and Midwifery Regulations*” means the Regulator specific regulations passed by Governor in Council;

“Meeting Rules” means such rules approved by the Board that govern the conduct of Board meetings that are not inconsistent with these Bylaws;

“midwifery” means the collective competencies, services, roles, functions and activities that comprise the scope of practice of midwifery as set out in section XX of the *Nursing and Midwifery Regulations*;

“nursing” means the collective competencies, services, roles, functions and activities that comprise the scope of practice of nursing as set out in section XX of the *Nursing and Midwifery Regulations*;

"officer" or "officers" means any 1 or more persons who have been elected as officers of the Regulator, and includes the Chair and Vice-Chair as the context requires;

“profession” means the profession of midwifery or the profession of nursing, as the context requires;

“Regulations” means either or both of the *General Regulations* and the *Nursing and Midwifery Regulations*, as the context requires;

“Regulator” means the Nova Scotia Nursing and Midwifery Regulator;

“Subsequent Board” means any Board appointed after the expiration of the term of the Initial Board;

“Terms of Reference” means those terms of reference for statutory committees approved by the Board;

“Vice-Chair” means the Vice-Chair of the Initial Board or any Subsequent Board, as the context requires.

## **2. CORPORATE SEAL**

2.1 The seal of the Regulator shall have the words “Nova Scotia Nursing and Midwifery Regulator” endorsed thereon.

## **3. HEAD OFFICE**

- 3.1 The head office of the Regulator shall be maintained within the province of Nova Scotia and located as to reasonably carry on the business of the Regulator.

#### **4. FORMS**

- 4.1 Any forms not already specified in the Act or Regulations and necessary for the administration of the affairs of the Regulator shall be as approved by the Registrar.

#### **5. INITIAL BOARD**

- 5.1 The Initial Board shall consist of all members of the Legacy Boards who, prior to the date of migration, have expressed interest in serving on the Initial Board.
- 5.2 The Initial Board shall be jointly appointed by the Legacy Boards prior to the date of migration.
- 5.3 The term of the Initial Board is twelve months from the date of migration, or such earlier time as may be determined by the Initial Board.
- 5.4 A Board member's term on the Initial Board does not count toward any term limit for Board Members serving on a Subsequent Board.
- 5.5 The officers of the Initial Board are the Chair and Vice-Chair, elected by the Legacy Boards in such manner as determined by the Legacy Boards prior to the date of migration.
- 5.6 An Officer's term on the Initial Board does not count toward any term limit for an Officer serving on a Subsequent Board.
- 5.7 The quorum for the Initial Board is a majority of its members, which must include at least one public representative.
- 5.8 Where a vacancy occurs due to the resignation, removal or otherwise of a member of the Initial Board who is not an officer, prior to the expiration of the term of the Initial Board, that vacancy may be either:
- 5.8.1 filled in such manner as determined by the Initial Board, or
  - 5.8.2 left vacant during the remaining term of the Initial Board if so determined by the Initial Board.
- 5.9 If a person is appointed by the Initial Board to fill a vacancy on the Initial Board pursuant to Bylaw 5.8, that person shall serve for the duration of the Initial Board's term and that term does not count toward any term limit for Board members serving on a Subsequent Board.
- 5.10 Where a vacancy occurs due to the resignation, removal or otherwise of the Chair of the Initial Board, that vacancy must be filled by the Initial Board with a person from

among the Initial Board membership in such manner as determined by the Initial Board, and the vacancy may or may not be filled by the Vice-Chair of the Initial Board, as determined by the Initial Board.

- 5.11 If a person is appointed by the Initial Board to fill a vacancy of the Chair pursuant to Bylaw 5.10 that person shall serve for the duration of the Initial Board's term and that term does not count toward any term limit for an officer serving on a Subsequent Board.
- 5.12 Where a vacancy occurs due to the resignation, removal or otherwise of the Vice-Chair of the Initial Board, that vacancy may be filled by the Initial Board with a member from among the Initial Board membership in such manner as determined by the Initial Board, and the time served by the replacement Vice-Chair does not count toward any term limit for an officer serving on a Subsequent Board.

## **6. BOARD MEETINGS**

- 6.1 The Chair of the Board shall call general meetings of the Board, with no less than 4 general meetings in a 12 month period.
- 6.2 The Registrar shall ensure notice of general Board meetings is given to Board members at least 14 days in advance of the general meeting, stating the time and whether the meeting is in-person, virtual, or hybrid.
- 6.3 The Chair of the Board may call a special Board meeting at any time as required by the Chair, and must call a special Board meeting upon the written request of one-third of Board members, and in either case must indicate the subject(s) to be considered.
- 6.4 Where possible, at least 3 days prior to a special Board meeting, notice shall be issued to each Board member. The notice shall state the purpose of the meeting. No matter shall be discussed at any special Board meeting apart from that specified in the Notice.
- 6.5 Meetings may be conducted by such electronic or other means as determined by the Board.
- 6.6 Notice of and voting at Board meetings may take place by such electronic or other means as determined by the Board.
- 6.7 Accidental omission to deliver notice of meetings does not invalidate proceedings at the meeting.
- 6.8 Notice requirements for meetings may be waived by majority vote of those participating in the meeting.

- 6.9 Board meetings will be conducted in accordance with these Bylaws and any Meeting Rules approved by the Board.
- 6.10 Where not inconsistent with the Bylaws or Meeting Rules, the Chair may make procedural rulings or determinations on any matter relevant to the meeting.
- 6.11 Except as otherwise provided in these Bylaws or the Meeting Rules, decisions to be made at Board meetings shall be decided by the majority vote of the Board members participating in the meeting.
- 6.12 The presiding officer of a Board meeting may only vote to break a tie.
- 6.13 In the event of a tie vote that the presiding officer chooses not to break, the motion is lost.

## **7. REMOVAL OF OFFICERS AND REGISTRANT BOARD MEMBERS**

- 7.1 Notwithstanding any other provisions of the Bylaws, the Board may, by a three-quarter majority vote of the Board members participating at any special meeting called for the purpose, remove any Board member, including an officer, before the expiration of their term, where the Board believes it is consistent with the objects of the Regulator to do so.
- 7.2 Examples where the Board may believe it consistent with the objects of the Regulator to remove a Board member include, but are not limited to:
  - 7.2.1 failing to attend 3 consecutive Board meetings, without sufficient cause accepted by the Chair; and
  - 7.2.2 acting contrary to the Board Code of Conduct policy.
- 7.3 A decision of the Board under this Bylaw is final.

## **8. CHAIR**

- 8.1 The Chair shall, unless otherwise delegated:
  - 8.1.1 preside at all meetings of the Board;
  - 8.1.2 act as the official spokesperson for the Board;
  - 8.1.3 perform all acts related to the office; and
  - 8.1.4 perform such other functions as directed by the Board.

## **9. VICE-CHAIR**

9.1 The Vice-Chair shall:

- 9.1.1 perform the duties of the Chair in the absence of the Chair;
- 9.1.2 perform all acts related to the office; and
- 9.1.3 perform other duties as delegated by the Chair.

## **10. STATUTORY COMMITTEES**

10.1 In addition to the requirements of the *Act* and the *Regulations*:

- 10.1.1 the members of statutory committees, and the panels of each committee shall be comprised of such persons as set out in the Terms of Reference for each committee, and
- 10.1.2 the quorum of a panel of a statutory committee shall include at least one public representative and representation from registrants holding such designations as set out in the Terms of Reference for the committee.

## **11. COMPOSITION OF SUBSEQUENT BOARDS**

11.1 Each Subsequent Board following the expiry of the term of the Initial Board shall consist of 9 Board members appointed in accordance with the Board and Committee Recruitment and Appointment Policy, and will include:

11.1.1 5 registrants who are in good standing, at least one of whom holds a current licence as a Registered Midwife, and at least one of whom holds a current licence in any of the following licensing categories:

- 11.1.1.1 Licensed Practical Nurse;
- 11.1.1.2 Registered Nurse;
- 11.1.1.3 Registered Psychiatric Nurse; or
- 11.1.1.4 Nurse Practitioner, and

11.1.2 4 public representatives.

## **12. REGISTERS**

12.1 The following are the registers to be kept by the registrar under section 27 of the Act:

- 12.1.1 Licensed Practical Nurse Practising Register;
- 12.1.2 Registered Nurse Practising Register;
- 12.1.3 Registered Psychiatric Nurse Practising Register;
- 12.1.4 Nurse Practitioner Practising Register;
- 12.1.5 Registered Midwife Practising Register;
- 12.1.6 Licensed Practical Nurse Conditional Register;
- 12.1.7 Registered Nurse Conditional Register;
- 12.1.8 Registered Psychiatric Nurse Practising Register;
- 12.1.9 Nurse Practitioner Conditional Register;
- 12.1.10 Registered Midwife Conditional Register.

## **13. CONTENT OF RECORDS**

13.1 The records to be kept for each registrant entered in a licensing category include

- 13.1.1 the name of the registrant, including the preferred name;
- 13.1.2 the register in which the registrant's name is entered;
- 13.1.3 the registrant's current contact information, including current employment or practice-related contact information;
- 13.1.4 the issuance and expiry dates of the registrant's licence;
- 13.1.5 any conditions or restrictions on the registrant's licence;
- 13.1.6 any licensing sanctions imposed on the registrant.

13.2 Registrants must provide the Regulator with updated contact information within 30 days of a change.

## **14. EXAMINATIONS**

- 14.1 An examination required for registration or licensing purposes shall be approved by the Board by resolution.
- 14.2 Each candidate for a registration or licensing examination is required to pay examination fees as approved by the Board.
- 14.3 The Board may determine whether a registration or licensing examination is one for which candidates will be permitted an unlimited number of attempts to successfully complete that examination or whether the examination is one for which there will be a limited number of attempts to successfully complete that examination.
- 14.4 Where the Board determines that a registration or licensing examination is one for which there will be a limited number of attempts to successfully complete that examination, the Board may:
  - 14.4.1 establish a maximum number of attempts to successfully complete the registration or licensing examination;
  - 14.4.2 authorize the registrar to determine what constitutes an attempt by a candidate to successfully complete the examination;
  - 14.4.3 authorize the registrar to grant a candidate who has exhausted the maximum number of attempts one or more additional attempts to successfully complete the examination where the registrar is satisfied it is consistent with the objects of the Regulator to do so.

## **15. PRACTICE HOURS**

- 15.1 A registrant must keep a record of the hours that the registrant practised, and in particular:
  - 15.1.1 Registrants with a Licensed Practical Nurse, Registered Nurse, or Registered Psychiatric Nurse designation must maintain records from at least the immediately previous five years;
  - 15.1.2 Registrants with the Nurse Practitioner designation must maintain records from at least the immediately previous three years; and
  - 15.1.3 Registrants with the Registered Midwife designation must maintain records from at least at least the immediately previous five years.
- 15.2 The registrar may at any time conduct an audit of records kept under ByLaw 15.1 to ensure the validity of data that is recorded on applications to the Regulator respecting hours worked in the designated practices.

## **16. CURRENCY OF PRACTICE REQUIREMENTS**

- 16.1 An applicant for a licence or a renewal of licence must provide proof satisfactory to

the registrar that the applicant meets one of the following currency of practice requirements:

- 16.1.1 for applicants for an initial licence with the Regulator, licensure in or outside of Canada as approved by the registrar in the profession and designation in which they seek to be licensed;
- 16.1.2 practice for such periods of time determined by the Board within a timeframe established by the Board;
- 16.1.3 satisfaction of the education requirement for registration within a timeframe established by the Board;
- 16.1.4 successful completion of one of the following within a timeframe established by the Board:
  - 16.1.4.1 a re-entry program;
  - 16.1.4.2 bridging education; or
  - 16.1.4.3 such other education as determined to be appropriate by the registrar;
- 16.1.5 successful completion of a competence assessment within a timeframe established by the Board;
- 16.1.6 such other requirement consistent with the objects of the Act as established by the Board.

## 17. **SCOPE OF PRACTICE - NURSING DESIGNATIONS**

- 17.1 The scope of practice of the Licensed Practical Nurse designation is the application of specialized and evidence-informed nursing knowledge, skills and judgment within the scope of practice of nursing, taught in an approved education program for Licensed Practical Nurses or set out in one or more of the following approved in such manner as determined by the Board:
  - 17.1.1 Licensed Practical Nurse competency frameworks,
  - 17.1.2 standards of practice applicable to Licensed Practical Nurses,
  - 17.1.3 practice guidelines applicable to Licensed Practical Nurses.
- 17.2 The scope of practice of the Registered Nurse designation is the application of specialized and evidence-informed nursing knowledge, skills and judgment within the scope of practice of nursing, taught in an approved education program for Registered Nurses or set out in one or more of the following approved in such manner as determined by the Board:

- 17.2.1 Registered Nurse competency frameworks,
- 17.2.2 standards of practice applicable to Registered Nurses,
- 17.2.3 practice guidelines applicable to Registered Nurses.

17.3 The scope of practice of the Registered Psychiatric Nurse designation is the application of specialized and evidence-informed nursing knowledge, skills and judgment within the scope of practice of nursing, taught in an approved education program for Registered Psychiatric Nurses or set out in one or more of the following approved in such manner as determined by the Board:

- 17.3.1 Registered Psychiatric Nurse competency frameworks,
- 17.3.2 standards of practice applicable to Registered Psychiatric Nurses,
- 17.3.3 practice guidelines applicable to Registered Psychiatric Nurses.

17.4 The scope of practice of the Nurse Practitioner designation is the application of specialized and evidence-informed nursing knowledge, skills and judgment within the scope of practice of nursing, taught in an approved education program for Nurse Practitioners or set out in one or more of the following approved in such manner as determined by the Board:

- 17.4.1 Nurse Practitioner competency frameworks,
- 17.4.2 standards of practice applicable to Nurse Practitioners,
- 17.4.3 practice guidelines applicable to Nurse Practitioners.

## **18. EXPANDED SCOPE OF PRACTICE**

18.1 The Board may by resolution approve an expanded scope of practice for a specified nursing designation when satisfied in such manner as determined by the Board of all of the following:

- 18.1.1 the proposed expanded scope of practice falls within the scope of practice of the nursing profession;
- 18.1.2 standards of practice and a competency framework for the proposed expanded scope of practice will be approved by the Board prior to any registrant engaging in the expanded scope of practice;
- 18.1.3 a consultation process approved by the Board has been completed; and
- 18.1.4 it is consistent with the objects of the Regulator to approve the proposed expanded scope of practice.

- 18.2 The Board may by resolution approve educational prerequisites for an expanded scope of practice for a specified nursing designation when satisfied in such manner as determined by the Board of all of the following:
- 18.2.1 the proposed education program includes the curriculum, resources and activities that collectively prepare the graduate of the program to safely, ethically and competently engage in the expanded scope of practice;
  - 18.2.2 the proposed education program is subject to regular evaluation in such manner and at such intervals as determined by the registrar;
  - 18.2.3 the institution offering the proposed education program has a system in place acceptable to the registrar to provide timely information respecting the status of registrants in the program;
  - 18.2.4 the institution offering the proposed education program has a system in place acceptable to the registrar to notify and consult with the registrar respecting any proposed changes to the program;
  - 18.2.5 the proposed education program meets such other criteria as determined by the Board to be relevant to the specific expanded scope of practice.
- 18.3 An applicant for authorization to practice in an expanded scope of practice shall submit a completed application in a form approved by registrar together with proof satisfactory to the registrar that the applicant:
- 18.3.1 successfully completed the educational prerequisites approved by the Board;
  - 18.3.2 holds a licence for the relevant designation;
  - 18.3.3 is not subject to any condition, restriction, agreement or limitation prohibiting them from engaging in the expanded scope of practice;
  - 18.3.4 meets all other eligibility criteria for the expanded scope of practice established by the registrar.
- 18.4 The Registrar may
- 18.4.1 approve the application;
  - 18.4.2 deny the application;
  - 18.4.3 approve the application with conditions or restrictions specific to the registrant.

- 18.5 The term of an authorization to engage in an expanded scope of practice is the same as the applicant’s licence, unless the registrar determines otherwise when issuing the authorization.
- 18.6 A decision of the registrar under Bylaw 18.4 or 18.5 is final.

**19. Authorized Titles and Scope of Practice**

- 19.1 A registrant holding a Registered Midwife practising licence or Registered Midwife conditional licence may, except to the extent modified by conditions, restrictions, terms, limitations or agreements:
- 19.1.1 engage in their individual scope of practice within the scope of practice of midwifery;
  - 19.1.2 use the titles Registered Midwife or the abbreviation RM or R.M..
- 19.2 A registrant holding a Licensed Practical Nurse practising licence or Licensed Practical Nurse conditional licence may, except to the extent modified by conditions, restrictions, terms, limitations or agreements:
- 19.2.1 engage in their individual scope of practice within the scope of practice of the Licensed Practical Nurse designation;
  - 19.2.2 use the title, description or designation nurse or Licensed Practical Nurse, or the abbreviation LPN or L.P.N..
- 19.3 A registrant holding a Registered Nurse practising licence or Registered Nurse conditional licence may, except to the extent modified by conditions, restrictions, terms, limitations or agreements:
- 19.3.1 engage in their individual scope of practice within the scope of practice of the Registered Nurse designation;
  - 19.3.2 use the title, description or designation nurse or Registered Nurse, or the abbreviation RN or R.N..
- 19.4 A registrant holding a Registered Psychiatric Nurse practising licence or Registered Psychiatric Nurse conditional licence may, except to the extent modified by conditions, restrictions, terms, limitations or agreements:
- 19.4.1 engage in their individual scope of practice within the scope of practice of the Registered Psychiatric Nurse designation;
  - 19.4.2 use the title, description or designation nurse or Registered Psychiatric Nurse, or the abbreviation RPN or R.P.N..
- 19.5 A registrant holding a Nurse Practitioner practising licence or Nurse Practitioner

conditional licence may, except to the extent modified by conditions, restrictions, terms, limitations or agreements:

19.5.1 engage in their individual scope of practice within the scope of practice of the Nurse Practitioner designation;

19.5.2 use the titles Nurse Practitioner or the abbreviation NP or N.P..

19.6 A registrant authorized under Bylaw 18.4 to engage in the expanded scope of practice of RN prescribing may, except to the extent modified by conditions, restrictions, terms, limitations or agreements, use the title “RN Prescriber” and “RN Authorized Prescriber” and the abbreviation “RN-AP”.

19.7 No person may take or use the title of “RN Prescriber”, “RN Authorized Prescriber”, the abbreviation “RN-AP”, or any derivation or abbreviation of them either alone or in combination with other words, letters or descriptions unless the person is 1 of the following:

19.7.1 a registrant authorized to engage in the expanded scope of practice of RN prescribing; or

19.7.2 Otherwise authorized to engage in prescribing as a registered nurse or to use the relevant title or description in accordance with the Act, the Nursing and Midwifery Regulations, the General Regulations or these bylaws.

## **20. NP CLIENT POPULATION CHANGE**

20.1 The registrar may determine when a Nurse Practitioner who is seeking to practise with a different client population must:

20.1.1 report their intention to practice with a different client population to the registrar;

20.1.2 obtain approval from the registrar before practising with a different client population.

20.2 When a Nurse Practitioner is required to obtain approval from the registrar before practicing with a different client population, the registrar may

20.2.1 approve the change in client population;

20.2.2 deny the change in client population;

20.2.3 approve the change in client population subject to the nurse practitioner’s consent to conditions or restrictions on their licence.

20.3 The registrar may require a Nurse Practitioner to satisfactorily complete such

competence assessments and bridging education as determined by the registrar before determining whether to approve the change in client population under Bylaw 19.2.

20.4 A decision of the registrar under Bylaw 20.2 or 20.3 is final.

## **21. CONTINUING COMPETENCE PROGRAM**

21.1 The Board shall approve a continuing competence program for each profession, and may approve a distinct continuing competence program for a designation.

21.2 The Board shall approve reporting requirements for registrants respecting the continuing competence program.

21.3 A registrant must retain documentation and records related to continuing competence program activities for at least the immediately previous 5 years.

21.4 For the purpose of verifying a registrant's compliance with the continuing competence program, the registrar may at any time conduct an audit of the documentation and records kept under Bylaw 21.3.

## **22. COMPETENCY FRAMEWORKS**

22.1 The competency framework for Licensed Practical Nurses is the *Entry-level Competencies for Licensed Practical Nurses in Canada (2019)* developed by the Canadian Council for Practical Nurse Regulators.

22.2 The competency framework for Registered Nurses is the *2020 Entry-Level Competencies for the Practice of Registered Nurses* developed by the Canadian Council of Registered Nurse Regulators.

22.3 The competency framework for Nurse Practitioners is the *Nurse Practitioner Entry-Level Competencies (2022)* developed by the Canadian Council of Registered Nurse Regulators.

22.4 The competency framework for Registered Psychiatric Nurses is the *2026 Entry-level Competencies of the Practice of Registered Psychiatric Nurses* developed by the Registered Psychiatric Nurse Regulators of Canada.

22.5 The competency framework for Registered Midwives is the *2020 Canadian Competencies for Midwives* developed by the Canadian Midwifery Regulators Council.

## **23. CODE OF ETHICS**

23.1 The Code of Ethics for Licensed Practical Nurses is the *2023 Code of Ethics for Licensed Practical Nurses in Canada* developed by the Canadian Council for Practical Nurse Regulators.

- 23.2 The Code of Ethics for Registered Nurses is the 2017 Edition *Code of Ethics for Registered Nurses* developed by the Canadian Nurses Association.
- 23.3 The Code of Ethics for Registered Psychiatric Nurses is the 2025 *Code of Ethics for Registered Psychiatric Nurses* developed by the College of Registered Psychiatric Nurses of Saskatchewan and adapted by the Nova Scotia College of Nursing.
- 23.4 The Code of Ethics for Nurse Practitioners is the 2017 Edition *Code of Ethics for Registered Nurses* developed by the Canadian Nurses Association.
- 23.5 The Code of Ethics for Registered Midwives is the 2018 Midwifery Regulatory Council of Nova Scotia Code of Ethics.

## **24. STANDARDS OF PRACTICE**

- 24.1 The Standards of Practice for Licensed Practical Nurses are the 2020 *Standards of Practice for Licensed Practical Nurses in Canada* developed by the Canadian Council for Practical Nurse Regulators and the 2024 Sexual Misconduct Standard for Registrants developed by the Nova Scotia College of Nursing.
- 24.2 The Standards of Practice for Registered Psychiatric Nurses are the Standards of Psychiatric Nursing Practice (2019) developed by the British Columbia College of Nurses and Midwives, College of Registered Psychiatric Nurses of Alberta, the College of Registered Psychiatric Nurses of Manitoba, and the Registered Psychiatric Nurses Association of Saskatchewan and adapted by NSCN in 2025, and the 2024 Sexual Misconduct Standard for Registrants developed by the Nova Scotia College of Nursing.
- 24.3 The Standards of Practice for Registered Nurses are the 2020 *Standards of Practice for Registered Nurses* developed by the College of Registered Nurses of Nova Scotia and the 2024 Sexual Misconduct Standard for Registrants developed by the Nova Scotia College of Nursing.
- 24.4 The Standards of Practice for Nurse Practitioners are the 2018 *Nurse Practitioner Standards of Practice* developed by the College of Registered Nurses of Nova Scotia and the 2024 Sexual Misconduct Standard for Registrants developed by the Nova Scotia College of Nursing.
- 24.5 The Standards of Practice for Registered Midwives are the *Midwifery Regulatory Council of Nova Scotia Standards of Midwifery Practice* (amended 2022) and the 2025 *Midwifery Council of Nova Scotia Standard: Prevention of Sexual Misconduct*.

## **25. WITNESS FEES**

- 25.1 Witnesses who are present under subpoena at a hearing are entitled to the same allowances as witnesses attending a trial of an action in the Supreme Court of Nova Scotia.

**26. TRANSCRIPTS OF REGULATORY PROCEEDINGS**

26.1 A registrant who requests that a transcript be made of a regulatory proceeding is responsible for paying the full cost of the transcript.

**27. FINES AND PENALTIES**

27.1 The fine that may be imposed by the Registrar for a registrant who has practiced without a licence for a period of less than one year shall be \$100 for each month, or portion thereof, the registrant practiced without a licence, but not to exceed in total double the amount of a registrant's annual licence fee.

27.2 The fine that may be imposed for the reinstatement of a suspended licence in accordance with section of 154 of the Act shall be the equivalent of double the annual licensing fee.

**28. NURSE PRACTITIONER REGISTRATION AND LICENSING CRITERIA**

28.1 In addition to the criteria for registration set out in the *Nursing and Midwifery Regulations*, an applicant seeking registration as a Nurse Practitioner must first be registered as a Registered Nurse with the Regulator.

28.2 In addition to the criteria for licensure set out in the *Nursing and Midwifery Regulations*, an applicant seeking a licence as a Nurse Practitioner must hold a current licence as a Registered Nurse with the Regulator.