



Nursing Associate Instructions for Renewal of Registration / License

Please read these instructions before completing the application for Retention of Registration / License

Re-Registration for Nursing Associates is prescribed in the Nursing and Midwifery Act 1997 & Nursing and Midwifery Rules 2010

Renewal of registration is required every two years during the period from September 1st to **October 31st of the year in which the registration is due to expire.**

Kindly complete all sections of the form before submitting. Incomplete Applications will not be processed.

The following must accompany your application:

1. Verification that you have been employed for at least 100 hours during the past twelve months (example: letter from employer)
2. Copy of a document supporting a name change if applicable
3. Evidence of a current Heart Saver/CPR certificate. (not to be used for CE)
4. Attach copy of certificates or other evidence showing that you have obtained 12 hours of continuing education relative to nursing associate scope of practice during the past two years. Verification of work competency, evidenced by employer certification is accepted. . A BNMC Continuing Education Form should be used to itemize continuing education activities to be considered. Attach this form to the application form prior to submission.
5. If you have received disciplinary action including termination by an employer for your job performance involving misconduct (incompetent/negligent patient care, patient safety and or theft) a detailed written explanation and resolution must be attached to your application.
6. If you have been convicted, found guilty or pleaded no contest to any offense within the past two years. Attach details to renewal application form.

7. Are you addicted to the use of alcohol and or the habitual use of narcotics or other habit forming drugs, if yes, please provide evidence of attendance at Rehabilitation. Attach to renewal application form.

The fee for retention is \$ 45.00 (subject to change). When an application is received after October 31, a late fee of \$45.00 (subject to change) will be levied. When made in person, cash payment in Bermuda or US \$ currency or personal Bermuda Bank cheque payable to the Accountant General is acceptable. When paying from overseas, in the form of US \$ currency bank draft/Cashier's cheque payable to the **Accountant General**. Do not send cash or personal cheque. **Debit/Credit cards are not accepted**

Examples of acceptable Courses/CE:

- On line related nursing CE courses /college courses relating to nursing practice. (Nursing students)
- Related to direct/Indirect patient care, relative to Nursing Associates Scope of Practice
- Related to direct/Indirect patient care, relative to Nursing Associates Scope of Practice
- Related to physical, social behavioral sciences.
- Continuing education in health care courses.
- Hosted by a provider (local) who is approved and recognized by BNMC credentialing committee. (Please check with course Provider or BNMC).
- Verification of competencies signed by employer/designate.

Examples Unacceptable Courses

- Self-improvement e.g. Exercise, yoga, parenting.
- Economic courses
- Liberal Arts
- Employer orientation programs
- Watching a health related TV program or Reading a book.