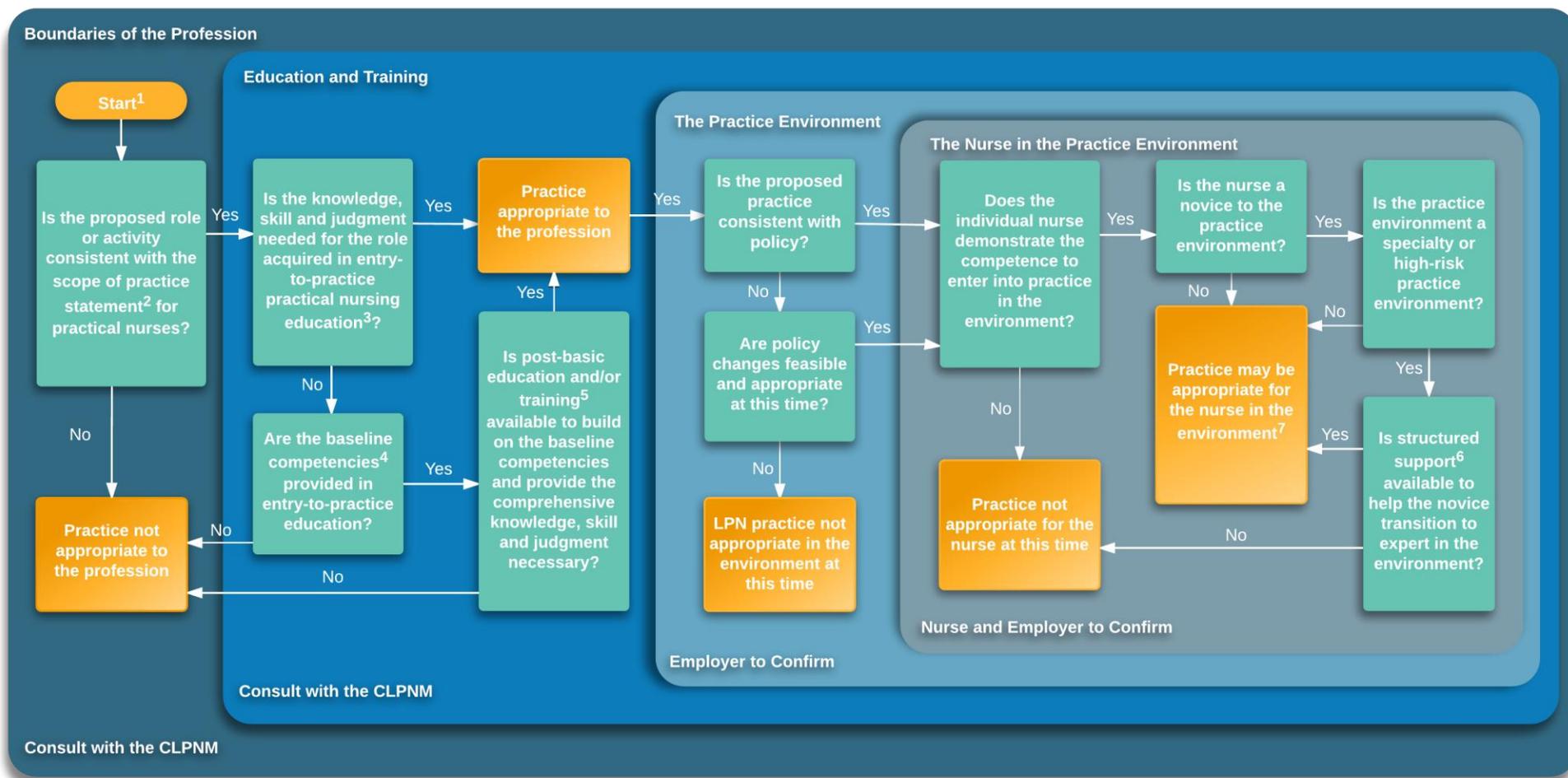


Determining Appropriate LPN Practice

A Guide to Decision-Making

The College of Licensed Practical Nurses of Manitoba (CLPNM) often receives questions about whether a practice environment, role or specific nursing activity is appropriate for Manitoba's Licensed Practical Nurses (LPNs). The flowchart below sets out the decision-making process that must be applied when these questions arise. The CLPNM, the employer and the nurse share responsibility for ensuring safe and appropriate LPN practice.



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Notes

- ¹ This process begins with the assumption that the employer has planned the health service based on an assessment of the health needs of the client population.
- ² The practice of practical nursing in Manitoba is “the provision of nursing services for the purpose of assessing and treating health conditions, promoting health, preventing illness, and assisting individuals, families and groups to achieve an optimal state of health.” *The Licensed Practical Nurses Act, Section 2.*
- ³ The *Entry Level Competencies for the Licensed Practical Nurse in Manitoba* are available at: www.clpnm.ca/standards-guidelines/competencies/
- ⁴ Baseline competencies refer to the foundational knowledge, judgment and skill that allow a professional to gain additional formal or informal education and clinical experience in an area of nursing practice. The concept is rooted in the understanding that knowledge is layered, and that scaffolding of knowledge does not end when a formal program of study ends. Examples applicable to practical nursing in Manitoba include nursing foot care and dialysis nursing. LPNs must complete additional education to practice in these areas; however, they are prepared to take the additional education, having acquired the foundational nursing knowledge, judgment and skill in the entry-level practical nursing program.
- ⁵ This may include formal courses of study available through post-secondary institutions, health authorities and agencies, and on-the-job training. Post-basic education and training that is acceptable to the CLPNM will, at minimum, provide:
 - In-depth understanding of client health factors (e.g. comorbidities, impact of determinants of health) common within the care context.
 - In-depth knowledge of anatomy and physiology related to the nursing intervention or area of care, which goes beyond that provided in foundational anatomy and physiology courses. (E.g. LPNs acquire knowledge of the integumentary system in entry-level education, but in order to work in a dermatology or cosmetic surgery clinic, they will require additional in-depth knowledge).
 - In-depth knowledge related to the medications and pharmacology specific to the care context.
 - Understanding of how the nursing process is applied in the care context, or in relation to the specific nursing intervention being taught, including:
 - Assessment: specific assessments of the client
 - Nursing diagnosis: common and expected nursing diagnoses
 - Planning: options, risks/benefits, indications/contraindications
 - Intervention: understanding of, and practical experience in performing, the nursing intervention
 - Evaluation: identification and management of expected outcomes; identification and management of unexpected outcomes
 - An assessment of the nurse by an experienced and authorized provider to confirm the nurse has acquired the knowledge, skill and judgment necessary to practice in the environment or to perform the specific nursing intervention being taught.
 - Documentation of this assessment.

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If post-basic education and training that meets these criteria is not currently available to LPNs in Manitoba, employers may consider developing an in-house training program, or exploring the education available to LPNs in other facilities or provinces.

- ⁶ An individual nurse may have the competence needed for entry into a practice environment, but if client health needs in that environment are specialized or the care delivered in that environment is high-risk, the CLPNM expects that structured support be provided to assist the nurse as he or she becomes experienced in that environment. This structured support may include orientations, workshops, team support and/or mentorship.
- ⁷ The nurse may be integrated into the practice environment; client-specific factors must continue to be considered when making decisions about the nurse's assignment.

Note: in future, this decision-making process will be revised to include authority to perform the reserved acts in the *Regulated Health Professions Act* (RHPA). However, recognizing that not all nursing activities are included in the reserved acts, and that some reserved acts authorized for LPNs will not be appropriate for every individual LPN, the decision-making framework is anticipated to remain relevant.

For More Information

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