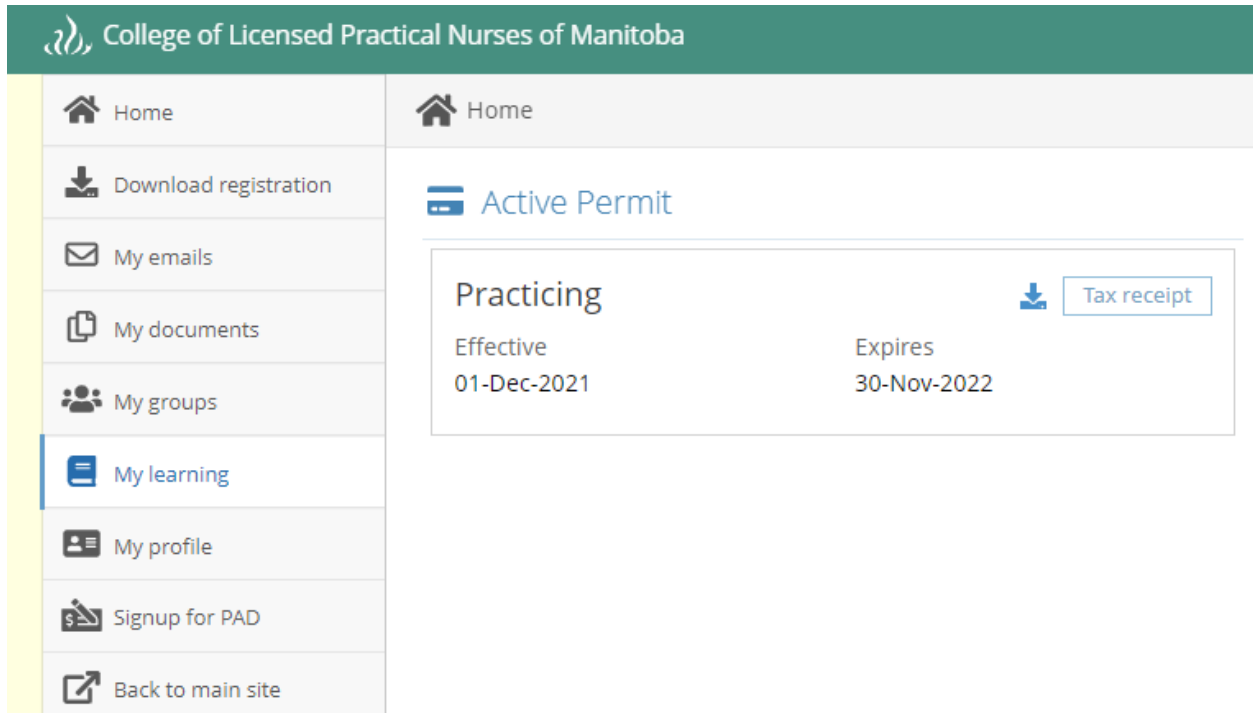


How to complete a Learning plan – For Registrants

1. From the member portal click on the My Learning tab



College of Licensed Practical Nurses of Manitoba

- Home
- Download registration
- My emails
- My documents
- My groups
- My learning**
- My profile
- Signup for PAD
- Back to main site

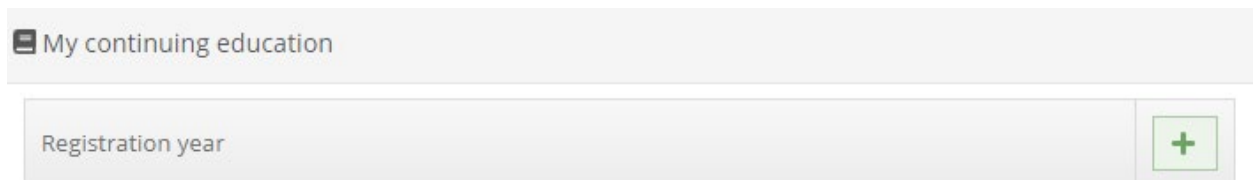
Home

Active Permit

Practicing [Tax receipt](#)

Effective: 01-Dec-2021 Expires: 30-Nov-2022

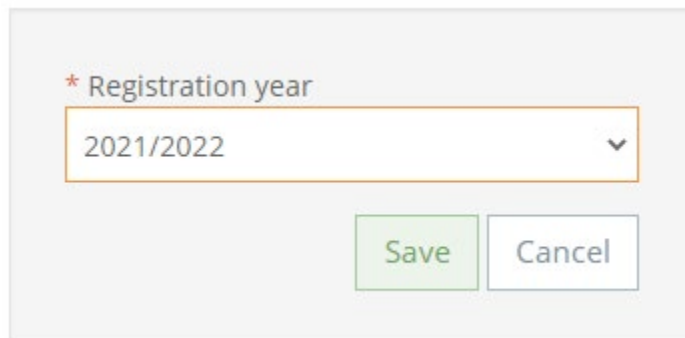
2. Click on the + button



My continuing education

Registration year [+](#)

3. Click 'Save'



* Registration year

2021/2022

Save Cancel

4. Fill out the Learning plans

INSTRUCTIONS

For more information on completing your learning plan check out the [CCP Instruction Guide](#)

* How many years have you practised as an LPN?

* What is/are your current area(s) of practice?

- | | | | |
|---|--|--|--|
| <input type="checkbox"/> Administration | <input type="checkbox"/> Aesthetics | <input type="checkbox"/> Agency Nursing | <input type="checkbox"/> Ambulatory Care |
| <input type="checkbox"/> Community Health | <input type="checkbox"/> Critical Care | <input type="checkbox"/> Diagnostic Imaging | <input type="checkbox"/> Emergency Care |
| <input type="checkbox"/> Geriatrics | <input type="checkbox"/> Home Care | <input type="checkbox"/> Maternal / Newborn | <input type="checkbox"/> Medicine |
| <input type="checkbox"/> Nursing Foot Care | <input type="checkbox"/> Nursing In Several Clinical Areas | <input type="checkbox"/> Nursing Instructor | <input type="checkbox"/> Occupational Health |
| <input type="checkbox"/> Oncology | <input type="checkbox"/> Operating Room | <input type="checkbox"/> Palliative Care | <input type="checkbox"/> Pediatrics |
| <input type="checkbox"/> Psychiatry / Mental Health | <input type="checkbox"/> Public Health | <input type="checkbox"/> Rehabilitation | <input type="checkbox"/> Research |
| <input type="checkbox"/> Surgery | <input type="checkbox"/> Teaching Employees | <input type="checkbox"/> Teaching Patients/Clients | <input type="checkbox"/> Teaching Students |

* How many years have you practised in this/these area(s)?

* Do you plan on changing your area of practice in the coming year?

Yes No

* Do you practice as self employed? [See here for a definition](#)

Yes No

GOALS

Learning Plan

* Domain

* Subdomain

* Describe a specific learning goal you have established for yourself.

* Describe the learning activities that you plan or planned to complete to meet your learning goal.

* Describe, in detail, the learning activities you have completed to meet your goal.

Include specific information such as dates and locations of workshops and courses, and proper citations for articles or other publications

* Describe, in detail, what you learned and how the learning has impacted, or will impact, your nursing practice

How has this learning enhanced your professional knowledge, skill and/or judgment? How have your clients been positively impacted by your learning?

5. Click 'Save for later' to save progress

Save for later

NOTE: You must click Save for later after updating the form in order to save progress

6. To return to the learning plan click on the My learning tab and then the arrow

My continuing education

Registration year

2021/2022

