



Background

The College of Licensed Practical Nurses of Manitoba (CLPNM) [Practice Direction on Self-Employed Practice](#) requires LPNs who engage in self-employed practice to reflect on the unique risks associated with their practice as the basis for developing and implementing risk management and mitigation strategies.

Risk management is a significant aspect of building and operating a self-employed practice. Adequate risk management strategies work to identify and prevent adverse events and minimize the impact of those events when they occur. Risk assessment informs service planning, procurement of equipment, harm prevention strategies, emergency management, and the development of policies, procedures, and protocols.

Purpose

This form has been developed to support the required risk analysis process.

When to complete this form

All Manitoba LPNs practising in a self-employed capacity must complete this form and update it at least annually. Note that if your self-employed practice changes significantly, you should complete this form again.

How to complete this form

If this form does not provide you with enough space to record your completed answers, you may record your answers in a separate document. Be sure to include the headings and questions from the form below, and keep all related documents together.

How to save this form

If you are a self-employed LPN, you must update and save this completed form as part of your professional portfolio at least annually. Maintaining a professional portfolio is part of each LPN's continuing competence obligations.

When to submit this form

The completed form does not need to be submitted to the CLPNM, unless:

- The CLPNM specifically requests it. The form may be requested by the CLPNM at any time, including during the Continuing Competence Program (CCP) Audit.
- You are a self-employed LPN who has been selected for the Quality Assurance (QA) Audit and you do not have another regulated health professional who can provide feedback on your practice. In this case, you must submit this completed and up-to-date form to the CLPNM Practice Department by email at practice@clpnm.ca by September 1. Note that if you are submitting this form as part of your QA Audit requirements, the form must be completed during the year you are selected for the CCP Audit (e.g., if you are selected for the 2024 CCP Audit, this form must have been updated and completed in 2024). Forms completed in years prior to your audit year will not be accepted.



CLPNM Disclaimer

When the CLPNM reviews a completed Self-Employed Practice Reflection on Risk Form (RRF), our focus is to assess whether there is evidence that the LPN has engaged in a thorough risk analysis process. The CLPNM does not assess, nor does the CLPNM accept responsibility for ensuring, that the risk assessment or risk management strategies are sufficient in the LPN's unique practice context. It is the LPN's responsibility to identify risks in their practice, and to plan appropriate strategies to address those risks, based on the LPN's unique expertise in their self-employed practice area.

CLPNM Registrant Information

Completed By	
Registrant Name	
Registration Number	
Self-Employed Business Name	
Type of Nursing Service(s) Offered (e.g., nursing foot care, aesthetic nursing, nurse owner/operator of a nursing/staffing agency, etc.)	
Email Address	
Phone Number	
Date Completed	

Reflection on Self-Employed Practice

1. How do I (will I) ensure I possess the necessary competencies when practising in a self-employed capacity?

2. How do I (will I) ensure ongoing competence without the formal guidance, mentorship or education offered by an employer or healthcare team?



Self-Employed Practice Reflection on Risk Form

3. Are the services I provide (or plan to provide) services that require me to collaborate regularly with, or make referrals to, other health care professionals, such as authorized prescribers? If so, how do I (or will I) facilitate the necessary collaboration, referrals, follow-up and/or follow through?
4. What steps have I taken to ensure that I have all the policies and procedures I need to provide safe, ethical, and competent care consistent with current best practice?
(Please describe the steps in your answer.)
5. What steps have I taken to ensure that I have all the equipment and resources I need to provide safe, ethical, and competent care consistent with current best practices?
(Please describe the steps in your answer.)



Self-Employed Practice Reflection on Risk Form

6. What steps have I taken to track and record my practice hours to ensure my self-employed practice provides adequate experience to support my ongoing competence, and to ensure I have third-party evidence to prove that my self-employed practice hours meet the CLPNM's practice hour requirement? (Please describe the steps in your answer.)

Note that:

- The minimum number of self-employed practice hours is set out in the CLPNM's [Practice Direction on Self-Employed Practice](#).
- Examples of third-party evidence may include invoices, financial records, claim submissions to insurance companies, tax records, information from clients, etc.

Reflection on Risk in Self-Employed Practice

7. How do I know that my self-employed practice is within, and remains within, the scope of practice of an LPN in Manitoba? Examples of things to consider: How do I incorporate the Standards of Practice and Conduct for Manitoba's LPNs into my self-employed practice? How do I incorporate the Code of Ethics for LPNs into my self-employed practice?

8. What are the actual and potential risks to the client related to the nursing services I offer? (i.e., What could go wrong?)



Self-Employed Practice Reflection on Risk Form

9. If something went wrong, what would be the impact to my clients, and how significant or serious could that impact be?

10. What is the likelihood that these risks could occur in my practice?

11. How can the actual and potential risks to clients be mitigated, and to what extent?
Examples of things to consider: What specific actions can I take to ensure I am prepared to prevent, minimize, and manage risks?

12. If an urgent/emergency situation or treatment complication were to occur with my client (e.g., anaphylaxis, hypersensitivity, nodule formation, infection, nerve or vascular adverse events, etc.), what steps would I take to deal with this emergency?
Examples of things to consider:
 - Who is available to help me manage this urgent situation?
 - What resources would we use?
 - What actions would need to be taken, in what order?



Self-Employed Practice Reflection on Risk Form

Reflection on Competence in Self-Employed Practice

13. In what area(s) of my self-employed practice would I say I am a novice practitioner?

14. What area(s) of my self-employed practice is developing or needs enhancement?

Summarize and Plan

15. Based on my overall reflection on my self-employed practice, what competency areas or risks should be the focus of a future learning goal for me? Examples of things to consider:
 - What do I need to learn more about to build on my competence and ensure my knowledge, skills, and judgment remain up-to-date?
 - What do I need to learn more about to demonstrate competence, confidence, and excellence in my self-employed nursing practice?
 - What do I need to learn more about to help me become even more prepared to prevent, minimize, and manage risks to my clients?

16. What types of learning activities might I engage in to meet the learning goal(s) noted above?