



Practice directions assist practical nurses in understanding their responsibilities and legal obligations, enabling them to make safe and ethical decisions within their practice. Practical nurses are expected to comply with the information disseminated in practice directions. Failure to do so may result in investigation for misconduct and/or an audit of the nurse's practice.

Purpose

The purpose of this practice direction is to provide guidance for LPNs in independent practice in the Province of Manitoba.

Independent Practice Guidelines

Independent practice is the application of nursing theory and principles in a self-directed employment setting. Parameters for independent practice are determined by legislation (*The Licensed Practical Nurses Act (2001)*), regulations, by-laws, the CLPNM Code of Ethics, the CLPNM Standards of Practice and the CLPNM documents that describe the competencies of the profession.

An LPN in independent practice must:

- be registered on the active practicing register at the CLPNM;
- maintain a minimum of 1000 hours of nursing practice in the previous 4 years, of which 250 hours shall be in the preceding year in the area where the LPN practises independently;
- provide evidence to the CLPNM that they have completed the CLPNM-approved post-basic education relevant to their area of practice (if required);
- identify themselves as independent practitioners with their annual registration renewal;

- ensure their business name is on file with the CLPNM; and
- develop and maintain policies and procedures that guide their practice in accordance with CLPNM practice standards, applicable legislation, and professional guidelines for best practice.

Independent Practice and Policy

In accordance with CLPNM Standard VII, Professional Responsibility and Accountability, the licensed practical nurse is responsible and accountable for their own practice and conduct:

Indicator 3: The licensed practical nurse adheres to policies and procedures of employment setting.

An LPN in independent practice must develop and maintain policies and procedures providing clear directives regarding all aspects of their business and their nursing practice in accordance with CLPNM practice standards, applicable legislation, and professional guidelines for best practice. These policies are also expected to define in writing the mission, vision, philosophy, and values of the business.

Independent Practice and Informed Consent

An LPN in independent practice has an ethical and legal obligation to obtain informed consent, based on the principle that a client is

autonomous and has the right to determine what happens or does not happen to them. Information, comprehension, and willingness to participate (voluntariness) are fundamental elements of informed consent.

Obtaining consent should adequately convey all the information needed for the client to understand the nature of the nursing care, its expected benefits, and any potential risks or consequences of not having the nursing care. In addition, this information must be communicated in a manner understandable to the client.

A client's consent to participate must be free from coercion and, above all, the client should be able to understand the information presented in order to make an informed decision. If a person is not capable of providing informed consent, formal appointment of a substitute decision maker is required.

The independent practicing LPN is responsible for obtaining documented informed consent at the initial visit for all clients for whom they provide nursing care. With each subsequent visit, the independent practicing LPN is expected to obtain verbal or implied consent for care provision. An example of implied consent may include the client removing their footwear and positioning themselves in preparation of foot care delivery. This verbal or implied consent must then be documented in the client health record. Documentation of consent with each client visit demonstrates the LPN's responsibility and accountability for their nursing practice and fulfills legal requirements of health record maintenance.

Independent Practice and Client Health Records

In accordance with the CLPNM standards of practice, Standard II Application of Knowledge, Skills and Judgment, the licensed practical nurse assesses clients' actual or potential strengths and limitations, and plans

interventions and evaluates outcomes.

Indicator 7: The licensed practical nurse maintains documentation of client care and observations that are chronological, legible, clear, timely, accurate and concise.

A health record is a comprehensive, permanent, written description of a client's health care status, needs, management, and care provided. Documentation in the health record is continuous and reflects the quality of care and the LPN's accountability in the provision of care.

The client health record must include:

- the client's name and address
- the name of the primary care physician as well as any referring health professional
- nursing health history/assessment
- the date and reasonable documentation of each client visit (on-site or telephone contact), and
- a copy of written consent or documented verbal consent.

All LPNs must understand that failing to document, falsifying a record, or breaching confidentiality constitutes professional misconduct. The independent practicing LPN is expected to develop and maintain evidence-based, personalized nursing care plans and health records for their clients. An independent practicing LPN is required to follow current legislation related to the retention, storage, and destruction of health records.

The CLPNM requires independent practicing LPNs to retain client health records for at least ten years from the date of the last entry recorded. Health records pertaining to clients who are under 18 years of age must be retained for 10 years after the client reaches the age of eighteen. Independent practitioners have a responsibility to ensure client health

records are stored securely and out of the public eye. When the LPN is transporting client health records, care must be taken to ensure confidentiality is maintained. The physical health record belongs to the “maker” of the record; however the information in the health record belongs to the client. The client has the right to assume all information collected is kept confidential.

In accordance with the CLPNM standards of practice, Standard IV, Ethical Practice, the LPN understands, promotes, and adheres to the ethical standards of the nursing profession: Indicator 5: The licensed practical nurse identifies, responds to and reports situations of unsafe practice or professional misconduct to appropriate authorities.

If a health record is lost or misplaced, the LPN is to notify the client and the CLPNM immediately.

Health record destruction must be done in a manner that preserves privacy and is in accordance with regulation under PHIA. The preferred methods of assured destruction are supervised incineration or supervised shredding. When destroying health records, a permanent record must be maintained with notation of:

- The name of the individual whose personal health information is being destroyed,
- The timespan of the destroyed material,
- The method of destruction, and
- The person responsible for supervising the destruction.

Electronic health record information is subject to the same security and requirements as a written health record. Client data shall be protected so that it cannot be altered or purged without proper authority, with controlled access to the computer and backup copies of files stored in a separate and secure location.

The independent practicing LPN who maintains electronic health records must ensure the system:

- Is capable of producing a written record if required,
- Maintains an audit trail that,
 - Records the date and time of each entry of information for each client,
 - Indicates and dates any changes in the recorded information,
 - Preserves the original content of the recorded information when changed or updated; and
 - Is capable of being printed separately from the recorded information for each client.
- Includes a secure password or otherwise provides reasonable protection against unauthorized access,
- Automatically backs up files and allows the recovery of backed-up files or otherwise provides reasonable protection against loss of, damage to, and inaccessibility of, information.

Insurance for Independent Practice

The CLPNM highly recommends LPNs in independent practice obtain additional insurance coverage over and above the errors and omissions liability insurance already included with CLPNM annual active practicing registration.

Further information regarding errors and omissions liability insurance coverage for LPNs in Manitoba may be found on the CLPNM website at www.clpnm.ca.

Independent practicing LPNs providing nursing care in private homes and/or in their own homes may require additional business insurance coverage which may not be covered

under regular home insurance policies. Business insurance needs may vary depending on the location of the business, type of service offered and the number of employees. To assist in the assurance of safe and ethical nursing practice, the CLPNM highly recommends LPNs seek legal advice when choosing to embark in independent practice. Failing to secure adequate insurance coverage will result in possible investigation for professional misconduct and an audit of the LPN's practice.

Further Information

For further information pertaining to independent LPN practice in Manitoba, see the following resources available on the CLPNM website at www.clpnm.ca:

- Standards of Practice
- Code of Ethics
- Entry-Level Competencies for the Licensed Practical Nurse in Manitoba
- Nursing Competencies for Licensed Practical Nurses in Manitoba
- Determining Appropriate LPN Practice
- Information about the CLPNM's Continuing Competence Program
- Information about Error and Omission Insurance, and Additional Insurance Programs

Additional information may also be accessed from other organizations including:

- Assiniboine Community College at www.assiniboine.net (Including information on the Nursing Foot Care Program)
- Government of Manitoba at www.gov.mb.ca (Including resources on *The Personal Health Information Act*)

- Office of the Privacy Commissioner of Canada at www.priv.gc.ca
- Any insurance provider who can advise on supplemental insurance coverage appropriate for LPNs in independent practice.

Additional questions may be directed to the CLPNM office at 204-663-1212 or 1-877-663-1212 toll free.

About the CLPNM

The CLPNM is the governing body for the licensed practical nursing profession in Manitoba. Mandated to govern its members in a manner that serves and protects the public interest, the CLPNM establishes practice requirements for the provision of safe and effective nursing care.

References

The following documents were consulted during the development of this practice direction.

CLPNM. (2004). *Standards of Practice*

CLPNM. (2007). *The Competency Profile for Licensed Practical Nurses of Manitoba*.

CLPNM. (2011). *Understanding Scope of Practice*.

CLPNM. (2012). *Registration Policy: Independent Practice*.

CLPNM. (2013) *CCP Instruction Guide*.

Lloyd Sadd Insurance Brokers. (2013). *Licensed practical nurses program*.

The Canadian Medical Protective Association. (2013). *A matter of records: Retention and transfer*.

Government of Manitoba. (2001). *The Licensed Practical Nurses Act of Manitoba*.