ENTRY-LEVEL COMPETENCIES
FOR THE LICENSED PRACTICAL NURSE
IN MANITOBA
Acknowledgments

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Background

In 2001, *The Licensed Practical Nurse Act* was proclaimed in Manitoba, which changed the practice expectations of licensed practical nurses (LPNs) in the province. Most significantly, the Act removed the requirement that LPNs work under the direction of a registered nurse or medical practitioner. In response to the changes, the College of Licensed Practical Nurses of Manitoba (CLPNM) published *Scope of Practice - Entry Level Competencies*, which described the competencies expected of all entry-level practical nurses in Manitoba at that time.

Since that time, advancements in health care, increasingly complex client needs, and changes to the nurse’s professional role have required the practical nursing profession to adapt. LPNs now work as autonomous practitioners, who are accountable for their own professional practice, even when practising as part of a collaborative interdisciplinary team. These changes have had a significant impact on the expectations of practical nurses following their graduation from an entry-level education program and entrance into professional practice. In fact, the practical nursing education program itself has had to change to meet the current expectations of practice. Most notable has been the establishment of the Diploma in Practical Nursing program in 2010.

The entry-level competencies were updated in 2016 to more accurately reflect the competencies taught to students in Manitoba's Diploma in Practical Nursing programs. Further revisions were introduced in 2021 to respond to changes in practice and societal expectations, and to align with revisions to the Canadian Council for Practical Nursing Regulators’ Entry-Level Competencies, which will inform the Canadian Practical Nurse Registration Examination beginning in 2022.

Purpose

This document describes the competencies expected of an entry-level LPN in Manitoba. It describes both the theoretical education and practical training that students in a practical nursing program receive. This document does not reflect all the competencies within the full scope of practice of the profession.

The competencies outlined here reflect the theoretical and practical education, knowledge, skills, judgment, and attitudes required of beginning practitioners to provide safe, competent, and ethical nursing care in a variety of settings to clients across the lifespan. By achieving the identified competencies, practical nurse graduates are able to function within the role of a beginning practitioner while meeting nursing practice standards.

LPNs are responsible for their own actions and are required to function within their own level of competence and educational preparation. As LPNs progress in their careers, they may expand their competencies through additional formal and informal training and professional experience. This document does not reflect all of the additional competencies gained by LPNs during the course of their careers. However, the competencies noted in this document do provide the foundation for all competencies that fall within full scope of practice for LPNs in Manitoba.
For further information on the scope of practice of the LPN beyond entry to practice, please refer to Section 2 of the Licensed Practical Nurses Act and the Nursing Competencies for Licensed Practical Nurses in Manitoba, 2021.

Assumptions

In addition to the entry-level competencies described in this document, the CLPNM assumes that entry-level LPNs also meet each of the following criteria.

Entry-level licensed practical nurses:

- Demonstrate they have obtained the entry-level competencies by graduating from an entry-level nursing program and by passing the Canadian Practical Nurse Registration Examination.
- Meet all requirements for initial registration with the CLPNM.
- Demonstrate the knowledge, skills, judgment, and attitudes required to perform each of the competencies outlined in this document.
- Demonstrate the Canadian Council for Practical Nurse Regulators’ (CCPNR) requisite skills and abilities to provide safe and competent care.
- Are prepared to provide safe, competent, and ethical nursing care in a variety of settings to clients across the lifespan.
- Understand that practical nursing is practised within parameters defined by legislation, regulation, scope of practice, standards of practice, a code of ethics, practice directions and entry-level competencies.
- Engage in self-reflection and participate in the CLPNM’s continuing competence program to maintain and expand their individual competence.
- Recognize their limitations and seek guidance from experienced practitioners.
- Gain confidence in their abilities through experience, and expand their knowledge, skills, and judgment as they progress throughout their career.
- Obtain the baseline competencies upon which they can develop additional competencies within the full scope of their profession.
- Adhere to and apply the profession’s standards of practice, scope of practice, practice directions, and code of ethics, as well as organizational guidelines, policies, and procedures.
- Work collaboratively as part of the interdisciplinary team to meet the holistic needs of the client.
- Use appropriate and safe techniques for all competencies performed within the care environment.
- Apply the concepts related to the determinants of health to individuals, families, groups, communities, and populations in various health care environments.
- Are accountable for their decisions and actions and are committed to protecting the public.
The Entry-Level Practitioner

Educational Preparation

To meet the expanding needs of the client and the health care system, the practical nursing program was converted in 2010 from a certificate program to a two-year diploma program. The Diploma in Practical Nursing (DPN) program includes theoretical, laboratory, and clinical experience.

Several post-secondary institutions in Manitoba offer the diploma program. Although each institution’s program is unique, all of them teach practical nursing students the entry-level competencies and provide their students with the educational foundation necessary to further develop their competencies within the full scope of the profession in Manitoba. To ensure this educational standard is upheld, the CLPNM conducts detailed annual program reviews and full program evaluations every five years for each institution that offers the program.

The theoretical components of the practical nursing program are derived from both the social and natural sciences. Students gain theoretical knowledge in many areas, including communication, anatomy and physiology, pathophysiology, and the nursing process. They are given the opportunity to apply their theoretical knowledge and skills in the laboratory environment before entering clinical practice.

The practical components of the program give students the opportunity to practise in various nursing care environments. Students synthesize the theoretical knowledge gained in the classroom and practical knowledge gained in the lab and apply what they have learned to real-life clinical situations in a supervised environment. Examples of clinical experiences include long-term care, acute medicine and surgery, pediatrics, community, and obstetrical placements, among others.

The Practice Setting

Entry-level practical nurses can work autonomously in the many work environments for which they have been prepared in their diploma program. Through that program, the licensed practical nurse gains a broad range of knowledge, skill, and judgment that can be applied in a variety of health care settings. As their career progresses, LPNs may develop the capacity to meet the care needs of clients in increasingly unpredictable, complex, and unfamiliar environments, through additional education, training and/or mentorship. Readers who require further details on how to determine appropriate roles for LPNs should refer to Determining Appropriate LPN Practice: Guide to Decision Making.
The Client

The client is the person or persons with whom the LPN is engaged in a professional therapeutic relationship. The client is a partner in their health care delivery and the nurse-client relationship is essential to establishing and reaching the client’s health care goals. LPNs care for clients of all ages across the lifespan, whose health care needs vary in complexity, within stable, unpredictable and unfamiliar environments. The LPN recognizes that each client is unique and has complex holistic health needs. “Client” may refer to an individual, family, group/aggregate, community or population. Depending on the nurse’s domain(s) of practice, the client may be a patient, a nursing student, a research participant, another CLPNM registrant, or other healthcare providers.

The Nurse

The entry-level practical nurse will be newly registered with the CLPNM, after demonstrating that they have met the educational requirements for registration and have passed the Canadian Practical Nurse Registration Examination. Entry-level practical nurses are at the beginning stage of their career and are able to provide nursing care in a variety of settings to clients with a range of complex health conditions across the lifespan. They have been taught the theoretical background and have been given the practical experience to be able to identify meaningful patterns and recurrent aspects of many clinical situations, and they are able to perform the entry-level competencies safely and confidently. While entry-level practical nurses have the knowledge, judgment and skill necessary to work autonomously in isolated environments, like all novice practitioners, they benefit from working as part of an interdisciplinary care team, which provides them with access to support, guidance, and mentorship as they become more experienced.

As members of a self-regulated profession, LPNs are accountable for their nursing practice. They are personally accountable for ensuring they have the required knowledge, judgment, and skill to provide safe client care in the environment in which they practice. For entry-level practical nurses, this means acknowledging that, in some circumstances, they have the foundational knowledge related to a specific skill or area of practice but may not have the practical experience or detailed theoretical knowledge required to practise autonomously in a specialized area of practice.

Note that entry-level practical nurses may be required to expand their knowledge and competencies, within the scope of their profession, to meet client needs and to provide safe, competent care in some specialized care environments. In circumstances where additional competencies are required, it is expected that the employer will assist the nurse to access additional formal or informal training, ongoing support, and the experience required to work within these specialized practice environments. Readers who require further details on how to determine appropriate roles for LPNs should refer to Determining Appropriate LPN Practice: Guide to Decision Making.
Entry-Level Competencies

The entry-level competencies are organized into six domains, and are summarized by the following general competency statements:

1. **People-centred care**: The Licensed Practical Nurse uses a people-centred approach in responding to the needs of the client. People-centred care is further organized into the subdomains of *Communication and Relational Skills; Respect, Dignity, and Human Rights;* and *Partnership with the Client.*

2. **Collaborative care**: The Licensed Practical Nurse practises as a member of the health care team in the delivery of comprehensive and integrated health care services to clients.

3. **Reflective practice**: The Licensed Practical Nurse applies a process of purposeful thinking and reflective reasoning to assimilate theoretical and practical knowledge for self-evaluation and for improvement in nursing practice. Reflective practice is further organized into the subdomains of *Critical Thinking, Evidence-Based Practice,* and *Nursing Process.*

4. **Knowledge-based practice**: The Licensed Practical Nurse critically appraises, analyzes, interprets, and synthesizes current knowledge, evidence, and best practice to provide rationale for effective nursing practice and for the provision of nursing care to clients, including those who are unstable, those who have complex health care needs, and those whose health outcomes are unpredictable.

5. **Safe and ethical care**: The Licensed Practical Nurse protects the client and health care providers, including themself, from psychological and physical harm, and upholds the ethical and practice standards of the profession. Safe and ethical care is further organized into the subdomains of *Integrating Professional Responsibilities, Documentation and Reporting,* and *Safe Practice.*

6. **Leadership**: The Licensed Practical Nurse provides leadership to maximize the health and well-being of the client, the nurse, the health care team, the organization, and society as a whole. Leadership is further organized into the subdomains of *Principles of Effective Leadership, Clinical Leadership,* and *Health Promotion and Client Education.*
1. People-Centred Care

The Licensed Practical Nurse uses a people-centred approach in responding to the needs of the client.

Communication and Relational Skills

The entry-level practical nurse:

- Differentiates between the attributes of therapeutic relationships and non-therapeutic relationships.
- Establishes, maintains, and appropriately concludes therapeutic relationships that are goal oriented and client centred.
- Establishes and maintains appropriate professional boundaries when communicating with clients.
- Uses appropriate communication strategies and interpersonal skills when interacting with clients who have specific communication needs.
- Implements contextually appropriate therapeutic communication techniques when interacting with clients.
- Applies effective and contextually appropriate verbal and non-verbal communication techniques in all professional communications.
- Uses appropriate professional communication techniques when conversing with clients, caregivers, and other health care professionals.
- Integrates culturally safe communication strategies when communicating with clients.
- Applies conflict management and resolution skills when necessary.
- Develops effective interpersonal relationships with clients, members of the health care team, and other stakeholders.
- Selects the most appropriate technology in all forms of communication.
- Maintains professional standards in written, electronic, and verbal communication.

Respect, Dignity, and Human Rights

The entry-level practical nurse:

- Establishes caring relationships that maintain client dignity during the course of care.
- Maintains therapeutic relationships that are compassionate and culturally safe.
- Understands, respects, and advocates for the fundamental rights of clients.
- Demonstrates knowledge of, and the ability to respond to, the Calls to Action of the Truth and Reconciliation Commission of Canada and the United Nations Declaration on the Rights of Indigenous Peoples.
- Establishes and maintains respect, empathy, trust, and compassion in interactions with clients.
- Promotes clients’ right to self-determination and informed decision-making.
• Recognizes and respects the diversity of clients, including their unique values, opinions, needs, beliefs, cultural identity, and lifestyle choices.
• Demonstrates knowledge of diversity between and within different cultures, including ethnicity, disability, social and economic status, age, sexuality, gender identity, faiths and beliefs.
• Uses knowledge of the impact of health disparities and health inequities to optimize health outcomes for all clients.
• Liaises with appropriate individuals to ensure that the spiritual needs, cultural needs, and human rights of clients are met.
• Advocates for client rights to equitable access to treatments and allocation of resources especially for vulnerable populations.
• Obtains informed consent (implied or express) during the course of providing nursing care.
• Empowers clients to draw on their unique strengths and take ownership of their own health.
• Recognizes the client role and contribution to the interprofessional health care team.

**Partnership With the Client**

The entry-level practical nurse:

• Recognizes the client as a partner in nursing care and practice.
• Encourages partnerships with clients and/or designates through their active participation and involvement in nursing care.
• Develops relationships between individuals, groups, or organizations to work together to achieve a common goal.
• Encourages shared power among all participants in the processes of health promotion, disease and injury prevention, health maintenance, restoration of health, and treatment and palliation of illness and injury.
• Assists clients in meeting their physiological needs and activities of daily living.
• Encourages the family of clients to participate in the provision of nursing care.
• Integrates the principles of primary health care and community health in partnering with clients.
• Includes clients and other health professionals in the coordination of the plan of care.
• Supports clients to make informed health decisions.
• Adapts practice in response to the client’s spiritual and cultural beliefs.
• Advocates for the use of Indigenous health knowledge and healing practices, in collaboration with the client, the client’s community, and Indigenous healers and Elders.
• Demonstrates the ability to use verbal and non-verbal communication skills to convey respect and empathy for the client.
• Collaborates with clients in decision-making and supports actions and interventions to meet their health and social needs.
• Informs the client of options, risks, and benefits related to their specific nursing interventions and treatments.
• Provides emotional support to clients and their families.
• Provides a range of options and approaches to address the care needs of clients.
• Uses principles of trauma-informed care which places priority on trauma survivors’ safety, choice, and control.
• Engages in self-reflection to interact from a place of cultural humility and create culturally safe environments where clients perceive respect for their unique healthcare practices, preferences, and decisions.

2. Collaborative Care

The Licensed Practical Nurse practises as a member of the health care team in the delivery of comprehensive and integrated health care services to clients.

The entry-level practical nurse:
• Provides holistic and compassionate care in collaboration with the health care team.
• Advocates for client values, beliefs, and decisions when interacting with other members of the health care team.
• Provides and receives constructive feedback from other health care professionals to improve professional practice.
• Fosters an environment that encourages questioning and exchange of information.
• Ensures nursing interventions and clinical data are communicated to the health care team as appropriate.
• Shares appropriate information about client care with the health care team while maintaining confidentiality.
• Identifies appropriate community resources for clients and refers as appropriate.
• Develops and maintains a partnership with the interprofessional health care team based on respect for the unique role and competencies of each member.
• Refers clients to the appropriate specialty care provider.
• Participates in shared decision-making about care delivery with colleagues and members of the health care team.
• Accesses appropriate psychosocial support services for clients and their families.
• Recognizes and seeks support when the needs of clients are beyond the nurse’s own level of competence, experience, and/or education.
• Identifies the need for, fosters and initiates interdisciplinary communication.
• Applies the principles of team dynamics and group processes in interprofessional team collaboration.
• Applies appropriate conflict resolution strategies to support effective teamwork and positive client outcomes.
• Collaborates with the health care team to inform policies, guidelines, and protocols.
• Consults with other members of the health care team to identify interventions and treatments for clients that would promote realistic health outcomes.
• Makes appropriate decisions about the resources needed to provide clinical care.
• Collaborates with the health care team to ensure continuity of comprehensive client care.
• Collaborates with the health care team to create a quality, professional practice environment that supports client safety.
• Assesses appropriateness for delegation, delegates care as appropriate, and provides clinical guidance to unregulated health care providers.

3. Reflective Practice

The Licensed Practical Nurse applies a process of purposeful thinking and reflective reasoning to assimilate theoretical and practical knowledge for self-evaluation and for improvement in nursing practice.

Critical Thinking

The entry-level practical nurse:

• Uses critical thinking, critical inquiry, clinical reasoning, and clinical judgment in the application of the nursing process to provide safe client care.
• Makes accurate, timely, and appropriate clinical decisions to produce the best possible care outcomes for clients.
• Engages in reflective practice to understand the impact of personal values, beliefs, and assumptions in the provision of nursing care and acts to reduce bias.
• Reflects on individual practice and re-evaluates own nursing knowledge, skill, and judgment.
• Questions, clarifies, and challenges unclear or questionable orders, decisions, or actions made by other interprofessional health care team members.
• Demonstrates respect, honesty, fair-mindedness, creativity, patience, persistence, and confidence when approaching clinical situations.
• Seeks out learning experiences to expand theoretical and practical knowledge.
• Uses knowledge and clinical judgment to deviate from the plan of care to respond to the evolving needs of the client.

Evidence-Based Practice

The entry-level practical nurse:

• Uses research, current knowledge, critical thinking, clinical reasoning, and clinical judgment to build an evidence-based practice.
• Reviews, integrates, and applies current evidence and research to clinical situations and decisions.
• Uses best practice and current evidence in the provision of quality nursing care and interventions.
• Maintains an informed position related to current evidence, trends, and issues that impact the client and the health care team.
• Integrates nursing knowledge, competencies, and attitudes to provide safe and effective nursing care.
• Integrates evidence-based practice initiatives into the practice environment in collaboration with members of the health care team.
• Participates in health care research following the direction of the research team.
• Advocates for the implementation and use of evidence-based practice.

**Nursing Process**

The entry-level practical nurse:

• Uses the nursing process to deliver safe, competent, and ethical nursing care to clients throughout the lifespan.
• Considers and adapts to the context of unique circumstances when applying the nursing process to a specific client.
• Incorporates the determinants of health into all aspects of the nursing process.
• Performs holistic and comprehensive health assessments on clients throughout the lifespan.
• Determines the most appropriate health assessment techniques for the specific context of clients and their current health care needs.
• Establishes a baseline assessment to assist in recognizing normal diagnostic values of clients and preventing possible complications or deterioration of their health.
• Conducts a comprehensive and systematic health assessment using a relevant evidence-based assessment framework to collect client data.
• Uses standardized assessment tools and resources to meet the individual needs of clients.
• Collects data from a variety of relevant sources and uses it to guide the nursing process.
• Uses a range of assessment techniques and tools to collect relevant and accurate data.
• Determines the cultural, psychosocial, and spiritual needs of clients using appropriate, evidence-based assessment tools.
• Analyzes and interprets assessment findings to formulate nursing diagnoses specific to each client’s health care needs.
• Communicates nursing diagnoses to clients and the health care team.
• Integrates assessment findings, clinical data, and identified nursing diagnoses in the development of a comprehensive nursing care plan.
• Plans nursing care in consultation with clients and in collaboration with the interprofessional team.
• Identifies health care outcomes in collaboration with clients and the interprofessional team.
• Documents and communicates the plan of care to members of the health care team.
• Verifies policies, procedures, and clinician orders prior to implementing the client plan of care.
• Provides safe and effective evidence-based nursing interventions to achieve identified client health outcomes.
• Implements the most appropriate nursing interventions according to assessment findings, client preference, the client’s health care needs, and desired outcomes.
• Formulates clinical decisions that are consistent with client needs and priorities.
• Uses appropriate technology to perform safe and efficient nursing interventions.
• Anticipates and prevents complications in client health during the delivery of care.
• Maintains clear, concise, accurate, and timely records of nursing interventions and assessment findings.
• Communicates client progress toward achieving identified health outcomes.
• Conducts ongoing comprehensive and detailed assessments of client status throughout client care.
• Observes client progress toward planned outcomes and revises the plan of care as appropriate.
• Compares actual health care outcomes to the expected outcomes.
• Evaluates client progress toward the expected health outcomes in consultation with client and the interprofessional team.

4. Knowledge-Based Practice

The Licensed Practical Nurse critically appraises, analyzes, interprets, and synthesizes current knowledge, evidence, and best practice to provide rationale for effective nursing practice and for the provision of nursing care to clients whose health care needs vary in complexity, and within environments that are stable, unpredictable, complex, and unfamiliar.

The entry-level practical nurse:

• Uses critical thinking and clinical reasoning when conducting health assessments and chooses the appropriate types of data collection to inform the nursing process.
• Uses clinical judgment when formulating nursing diagnoses, developing nursing care plans, providing nursing interventions, and evaluating outcomes.
• Integrates legal and ethical considerations for safe practice while applying the nursing process.
• Integrates knowledge of anatomy and physiology to determine the most appropriate assessment type, identify client needs, determine the most appropriate nursing interventions, and evaluate their effectiveness.
• Integrates knowledge related to the disease processes, etiology, pathophysiology, clinical manifestation, and alterations in client health to identify pertinent assessment data and client needs, and to determine the most appropriate nursing interventions and evaluate their effectiveness.
• Selects and utilizes information and communication technologies (ICTs) in the delivery of client care.
• Demonstrates knowledge of the uses of virtual care, and the related ethical considerations and professional requirements.
• Uses evidence-based knowledge from nursing, health sciences, and related disciplines to select individualized nursing interventions.
• Autonomously performs a wide range of nursing interventions that promote, maintain, and restore health; prevent disease and injury; and assist clients in meeting their expected health outcomes.
• Administers pharmacological and non-pharmacological interventions in accordance with assessment findings, client symptoms, and prescribed drug regimens.
• Applies the principles of safe medication preparation, administration, handling, storage, and disposal.
• Administers medications and vaccines by any route or method.¹
• Recognizes own individual competence related to specific nursing interventions.
• Integrates knowledge of diagnostic criteria, treatment methods, and collaborative approaches to client care for health conditions when determining the right course of action for nursing care.
• Performs common screening and diagnostic procedures and obtains diagnostic samples.
• Interprets common screening and diagnostic tests results.
• Responds appropriately to screening and diagnostic study results.
• Implements psychosocial interventions as part of the client plan of care.
• Participates in primary, secondary, and tertiary interventions for clients across the lifespan.
• Uses knowledge, clinical skills, and judgment in implementing health promotion activities for the client in primary, secondary, and tertiary care.
• Recognizes anticipated health care outcomes and goals of the treatment plan for clients when facilitating health promotion activities and providing nursing interventions.
• Uses evidence-based practice guidelines and protocols in the implementation of acute interventions during client care.
• Educates clients about potential therapeutic and adverse effects related to their treatment regimen and nursing interventions.
• Recognizes the clinical manifestations of an emergency.
• Responds to clinical emergencies by stabilizing the client and providing appropriate emergency interventions.
• Collaborates with the health care team to coordinate the actions of others in emergencies.
• Adheres to infection-control guidelines and protocols and uses standard precautions and aseptic technique in daily practice.

5. Safe and Ethical Care

The Licensed Practical Nurse protects the client, themself, and other health care providers, from psychological and physical harm, and upholds the ethical and practice standards of the profession.

Integrating Professional Responsibilities

The entry-level practical nurse:
• Provides safe, quality, and ethical nursing care.
• Supports the mandate of the CLPNM to serve and protect the public.

¹ Licensed Practical Nurses acquire in-depth knowledge, judgment, and skill related to pharmacology and safe medication administration practices in the entry-to-practice Diploma in Practical Nursing Program. Although the skill for emerging or specialized medication administration techniques or routes may not be taught and/or practiced in the program, the baseline competencies required for continued competence in pharmacology and safe medication administration practices are provided, thus allowing for the graduate to be taught the specific or advanced skills in the employment setting.
• Practises according to established policies, procedures, and standards within the work environment.
• Distinguishes between the legislated scope of practice, employer policies, and individual competence.
• Adheres to the ethical principles of autonomy, confidentiality, privacy, dignity, and equity when providing nursing care.
• Understands the practical nurse’s obligation to adhere to licensed practical nurse legislation, regulations, by-laws, and regulatory documents.
• Understands, upholds, and promotes the Standards of Practice of the profession.
• Uses and adheres to the Standards of Practice to guide own nursing practice.
• Understands, upholds, and promotes the ethical standards of the profession as outlined in the CLPNM Code of Ethics.
• Applies the CLPNM Code of Ethics to address situations of ethical conflict, dilemma, or distress.
• Recognizes and supports the values of clients and the nursing profession.
• Recognizes the impact of own values on the ability to provide client-centred care.
• Advocates for the decisions, values, and rights of clients.
• Recognizes and upholds legal and ethical responsibilities in responding to ethical issues during nursing practice.
• Applies the concepts of autonomy, beneficence, non-maleficence, and justice in nursing practice.
• Practises within the practical nursing profession’s legislated scope of practice.
• Conducts self-assessments to ensure the nurse possesses the theoretical and practical knowledge to safely carry out procedures, treatments, and interventions prior to implementation.
• Identifies and intervenes in incidents of unsafe, unethical practice and professional misconduct while maintaining client safety.
• Acts on the ethical responsibility and legal requirement to report situations of unsafe, unethical, and unprofessional practice and abuse.
• Practises in collaboration with the interprofessional team to ensure safe, competent, comprehensive, and ethical care.
• Demonstrates professional judgment to ensure social media and ICT are used in a way that maintains public trust in the profession.
• Uses the Standards of Practice, scope of practice, and CLPNM Code of Ethics to assess own learning needs.
• Actively seeks opportunities for professional growth and development.
• Develops and implements a learning plan based on own identified needs.
• Maintains a portfolio of learning activities, experience, and professional development.
Documentation and Reporting

The entry-level practical nurse:

- Complies with privacy legislation and organizational policies and procedures when documenting client care.
- Reports violations of privacy legislation to appropriate authorities.
- Maintains client privacy and confidentiality in all forms of communication.
- Documents according to established policies, procedures, and standards within the work environment.
- Completes documentation that is thorough, accurate, factual, organized, timely, and compliant with facility standards.
- Documents in client’s health record all information pertaining to a client’s health care management that is gathered by assessment, observation, interaction, or implementation of the nursing interventions.
- Clearly documents any applicable data related to changes in a client’s condition.
- Receives, transcribes, and initiates orders from authorized health care professionals.
- Receives, transcribes, communicates, and documents results of screening or diagnostic tests.
- Informs appropriate health professionals of changes in a client’s condition.
- Completes incident reports and other appropriate documentation as necessary.
- Objectively describes any event not consistent with the routine care of the client.
- Provides client report through various types, methods, and processes.

Safe Practice

The entry-level practical nurse:

- Identifies clients that are at risk of harming themselves or others and implements appropriate measures to ensure safety of client, self, and the health care team.
- Responds appropriately to incidents of crisis and aggressive behaviour.
- Applies the nursing process to minimize environmental risks to clients in the provision of nursing care.
- Assesses for potential risks to clients and members of the health care team in the clinical care environment.
- Identifies, reduces, prevents, and communicates risks in the practice environment.
- Advocates for clients and the health care team to encourage safe client care environments.
- Uses safety measures and follows safety protocols to ensure a safe work environment.
- Uses personal protective equipment and safety equipment appropriately while performing nursing interventions.
- Manages and evaluates the appropriateness of physical resources in the provision of safe, effective, and efficient care.
- Communicates safety risks to team leaders and managers.
- Contributes to quality improvement, risk management, and workplace health and safety activities of the clinical environment.
• Collaborates with the client and staff to ensure a safe physical environment.
• Minimizes environmental hazards to reduce the risk of injury to the client, self, and others.
• Collaborates with clients and staff to minimize procedure-related incidents and equipment-related accidents, prevent staff-related injuries, and ensure personal safety and generally promote safe work practices.
• Identifies potentially dangerous situations and takes action to protect self, colleagues, and clients from injury.
• Assesses needs and implements strategies related to risk management and harm reduction.
• Establishes and maintains a safe and caring environment that supports clients to achieve optimal health outcomes.
• Initiates collaboration to support care planning and safe, continuous transitions from one health-care facility to another, or to residential, community or home and self-care.

6. Leadership

The Licensed Practical Nurse provides leadership to maximize the health and well-being of the client, the nurse, the health care team, the organization, and society as a whole.

Principles of Effective Leadership

The entry-level practical nurse:

• Demonstrates an understanding of the health care system organization, characteristics, and types of organizational structures.
• Understands own role as a member of a diverse interdisciplinary health care team.
• Uses the attributes of an effective nurse leader to promote a healthy work environment.
• Participates in the development of and reinforces the organizational policies, procedures, and guidelines to support best practice.
• Advocates for changes to organizational policies and procedures that will advance clinical care and promote healthy practice environments for clients and health care providers.
• Promotes optimization of licensed practical nurses in clinical, political, and professional contexts.
• Supports professional efforts in the field of licensed practical nursing to achieve a healthier society.
• Develops and implements strategies to meet changes in practical nursing practice and health care delivery.
• Promotes a culture of safety within the practice environment.

Clinical Leadership

The entry-level practical nurse:

• Demonstrates appropriate leadership styles, behaviours, and strategies.
• Promotes effective communication between members of the interprofessional team.
- Acts as a mentor and role model for students, graduates, colleagues, and members of the health care team.
- Assesses the knowledge and skills of unregulated health care professionals and matches tasks to their skill sets in adherence to facility policy/job description.
- Provides education, supervision, and support of unregulated health care providers.
- Participates in opportunities for professional development and continuing education in the workplace and contributes to team development.
- Advocates for a people-centred approach in the delivery of health care services.
- Participates in clinical quality improvement initiatives.
- Integrates quality improvement principles and activities into own nursing practice.
- Organizes workload and applies time management skills to meet requirements of the plan of care.
- Prioritizes workload based on client needs, clinical assessments, acuity, and optimal time for interventions.
- Evaluates barriers to effective time management and priority setting and implements appropriate strategies to overcome barriers.
- Responds to unexpected or rapidly changing situations by altering the daily plan of care.
- Develops and enhances leadership skills through ongoing education, clinical mentoring, and experience.
- Participates in and contributes to the development of health public policy.

**Health Promotion and Client Education**

The entry-level practical nurse:
- Uses effective communication strategies in teaching and learning.
- Promotes a positive, safe, and respectful learning environment for clients, peers, students, and colleagues.
- Uses the nursing process to respond to the client’s learning needs and adjust their teaching strategies.
- Recognizes the barriers to effective teaching and learning strategies and applies appropriate interventions to address them.
- Assesses client learning needs, motivation, and readiness to learn.
- Assesses client health literacy on the selected topic.
- Assists clients in identifying health education goals that are realistic and achievable.
- Collaborates with clients to establish learning objectives, identify priorities, and personal preferences related to their health goals.
- Collaborates with clients to develop and implement an education plan.
- Gathers appropriate resources to meet client learning needs.
- Evaluates the quality and appropriateness of health teaching resources for the specific client circumstances.
- Applies the appropriate teaching/learning strategies in response to client learning needs.
- Assists clients to access, review, and evaluate information the client retrieves using ICTs.
- Applies the principles of health education while teaching clients.
• Provides sociocultural and contextually appropriate information, educational materials, and learning resources.
• Evaluates whether client learning outcomes are achieved.
• Adapts teaching plan and methods to meet ongoing learning needs of clients.
• Integrates the principles of primary health care in client education.
• Incorporates principles of harm reduction to reduce negative effects of client behaviours on health.
• Uses a range of verbal and non-verbal communication methods, and considers cultural differences, to better understand and respond to a client’s personal and health needs.
Glossary of Terms

**Accountability:** The obligation to answer for the professional, ethical, and legal responsibilities of one’s activities and actions and/or inactions.

**Act:** A written ordinance made by a parliament or legislative body.

**Advocate:** To speak or act on behalf of self or others with the intent of influencing or adding voice and enhancing autonomy.

**Aggregate:** A collection of individuals who have in common one or more personal or environmental characteristics. Aggregates are defined as groups within a larger population (subpopulation).

**Application of knowledge:** The use of abstract, learned ideas in a practical situation.

**Autonomous practitioner:** A practitioner who has the competence and authority to act in accordance with self-chosen goals and to assume the professional responsibility related to their own decisions. This includes making independent decisions about client care within the parameters of the practitioner’s role and scope of practice and adhering to the standards of practice and code of ethics of the practitioner’s profession.

**Bias:** The negative evaluation of one group and its members relative to another (Blair et al., 2011).

**Baseline competencies:** 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 understanding that knowledge is layered, and that scaffolding of knowledge does not end when a formal program of study ends.

**Boundaries:** Professional boundaries separate therapeutic relationships from personal relationships. The nurse’s relationship with a client, and behaviour towards the client, must remain within the boundaries of the professional therapeutic relationship. Professional boundaries protect the client from the inherent imbalance between the nurse’s power and the client’s vulnerability.

**Client:** The person or persons with whom the nurse is engaged in a professional therapeutic relationship. The client may be an individual, family, group/aggregate, community or population. Depending on the nurse’s domain(s) of practice, the client may be a patient, a nursing student, a research participant, another CLPNM registrant, or other healthcare providers.

**Client safety:** The pursuit of the reduction and mitigation of unsafe acts within the health care system, as well as the use of best practices shown to lead to optimal patient outcomes.

**Clinical judgment:** A reasoning process that relies on critical thinking and multiple ways of knowing. Clinical judgment implies the systematic use of the nursing process to invoke the
complex intuitive and conscious thinking strategies that are part of all clinical decision-making in nursing.

**Clinical reasoning:** The ability to discern the relevance of knowledge and evidence to the actual client; the thinking that guides practice. Clinical reasoning links theory to practice, uses past experiences to guide decisions, and connects personal values and style to therapeutic nursing interventions.

**Collaboration:** The act of working together with one or more members of a team who each contribute to achieving a common goal.

**Communication:** The transmission of verbal and/or nonverbal messages between a sender and a receiver for the purpose of exchanging or disseminating meaningful, accurate, clear, concise, complete, and timely information (includes transmission using technology).

**Community:** An entity composed of systems of formal organizations reflecting society’s institutions, informal groups, and aggregates. When caring for a community as a client, the focus is on the collective health and wellbeing of the community, not any one individual’s health status within that community.

**Compassion:** A multidimensional concept consisting of three key elements: recognizing another person’s suffering, empathizing with that person’s pain, and acting in a way to ease the suffering.

**Competence:** The ability of a nurse to integrate the professional attributes required to perform in each role, situation, or practice setting. Professional attributes include, but are not limited to knowledge, skills, judgment, attitude, values, and beliefs.

**Competencies:** Statements describing the expected performance that reflects the integration of knowledge, skills, judgment, and professional attributes required in a given nursing role, situation, or practice setting.

**Critical inquiry:** A purposeful, disciplined, and systematic process of continual questioning, logical reasoning and reflecting using interpretation, inference, analysis, synthesis, and evaluation to achieve a desired outcome.

**Critical thinking:** An active and purposeful problem-solving process that requires LPNs to advance beyond the performance of skills and interventions to provide the best possible care, based on evidence. Critical thinking includes identifying and prioritizing risks and problems, clarifying and challenging assumptions, using an organized approach to assessment, checking for accuracy and reliability of information, weighing evidence, recognizing inconsistencies, evaluating conclusions, and adapting thinking.

**Cultural humility:** The process of self-reflection to understand personal and systemic biases and to develop and maintain respectful processes and relationships based on mutual trust. Cultural humility involves humbly acknowledging oneself as a learner when it comes to understanding another’s experience. For example, nurses can demonstrate cultural humility
by collaborating with clients to integrate their culture into client care and developing mutual goals and the best approach to their care.

**Culturally safe environment**: An environment, which is safe for people, where there is no assault, challenge, or denial of their identity, of who they are and of what they need. It is about shared respect, shared meaning, shared knowledge, and experience, of learning together with dignity, and truly listening. Strategies for promoting a culturally safe environment include modeling correct behaviour and encouraging a climate of inclusivity and mutual respect.

**Culture**: Culture includes, but is not restricted to, race, ethnicity, gender, sexual orientation, socioeconomic status, age, physical ability, religious beliefs, political beliefs, and ideologies.

**Delegation**: Extending authority to perform a specific client care task to an unregulated care provider who does not otherwise have the authority to perform the task, while retaining accountability for the outcome.

**Diversity**: The ethnic, social, or gender variety in a group, culture, or institution. The concept of diversity reflects an understanding that everyone is unique and recognizes individual differences. These can be along the dimensions of race, ethnicity, gender, sexual orientation, socioeconomic status, age, physical abilities, religious beliefs, political beliefs, or other ideologies.

**Documentation**: Written or electronically generated information about a client that describes the care, including the observations, assessment, planning, intervention and evaluation or service provided to that client.

**Entry-level licensed practical nurse**: The licensed practical nurse at the point of initial active practising registration with the CLPNM, after completing entry-level educational preparation and passing the Canadian Practical Nurse Registration Examination.

**Ethical**: The fundamental disposition of the licensed practical nurse toward what is good and right. Action toward what the licensed practical nurse recognizes or believes to be the best and most appropriate practice in a particular situation.

**Harm reduction**: A public health approach aimed at reducing the adverse health, social and economic consequences of at-risk activities such as the use of illicit substances (Canadian Nurses Association, 2017).

**Health care team**: Providers from different disciplines, often including both regulated health professionals and unregulated workers, working together to provide care for and with individuals, families, groups, communities, populations.

**Health equity**: The absence of unfair and avoidable or remediable differences in health among population groups defined socially, economically, demographically, or geographically.
**Health outcomes:** Those events occurring because of an intervention. These may be measured clinically (physical examination, laboratory testing, imaging), self-reported, or observed.

**Health promotion:** The process of enabling people to increase control over and improve their health based on an understanding of the determinants of health. Health promotion is particularly concerned with values and vision of a preferred future.

**Interpretation:** A person’s understanding of the meaning of something including evolving knowledge, scientific information, and research findings.

**Interprofessional collaboration:** Collaboration between members of different professions, such as social workers, and physicians.

**Intraprofessional collaboration:** Collaboration between members of the same profession.

**Leadership:** The process of influencing people to accomplish common goals. The attributes of leadership include self-awareness, commitment to individual growth, ethical values and beliefs, presence, reflection and foresight, advocacy, integrity, intellectual energy, being involved, being open to new ideas, having confidence in one’s own capabilities, and a willingness to try to guide and motivate others. Leadership is not limited to formal leadership roles.

**Partnerships:** Situations in which the nurse works with clients and other members of the health care team to achieve specific health outcomes for the client. Partnership implies consensus-building in the determination of these outcomes.

**Population:** A collection of people who share one or more personal or environmental characteristics and reside in a community. These people may or may not come together as a group/aggregate.

**Quality improvement:** An organizational philosophy that seeks to meet clients’ needs and expectations by using a structured process that establishes indicators of quality, monitors performance against the indicators, and utilizes findings to make improvements in all aspects of service.

**Racism:** Practices or attitudes that have, whether by design or impact, the effect of limiting an individual’s or a group’s right to the opportunities generally available because of attributed rather than actual characteristics (Abella, 1984).

**Reflection:** The process of thinking back on or recalling a situation to discover its purpose or meaning. Reflection is necessary for self-evaluation and improvement in nursing practice.

**Reflective nursing practice:** The practice of a nurse purposefully recalling and examining situations or actions to examine own behaviour and that of others while in a situation to discover its purpose. Reasoning processes that rely on critical thinking are also important dimensions of the nurse’s reflective practice, as well as the systematic use of the nursing process to invoke complex intuitive and conscious thinking strategies that are part of all clinical decision-making.
**Research:** Systematic inquiry that uses orderly scientific methods to answer questions or solve problems.

**Responsibility:** The characteristics of reliability and dependability. It implies an ability to distinguish between right and wrong. Responsibility includes a duty to perform actions adequately and thoughtfully.

**Safe practice:** The reduction and mitigation of unsafe acts within the health care system. This refers to both staff and client safety. Staff safety includes, but is not limited to, prevention of musculoskeletal injury, prevention and management of aggressive behaviour, and infection control. Client safety is the state of continuously working toward the avoidance, management, and treatment of unsafe acts.

**Self-regulated nursing profession:** The governance of nurses by nurses in the public interest. Elements of self-regulation include setting professional standards; developing a code of ethics; establishing a continuing competence program, credentialing, and certification process; and participating in professional activities and continuing education.

**Skills:** Actions or behaviours carried out with an adequate degree of proficiency or dexterity in the performance of activities. Skills can be psychomotor (involving body movement and dexterity), cognitive (involving critical interpretation and decision-making) or relational (involving communication and being with clients).

**Stakeholder(s):** A person, group, or organization that is invested in the practice of practical nursing and client health care. Examples include the public, nurses, other health care providers, employers, and educators.

**Timely:** Ensuring that a response or action occurs within a timeframe required to achieve safe, effective, and positive client outcomes.

**Therapeutic relationship:** A relationship that is professional and ensures the client’s needs are first and foremost. The relationship is based on trust, respect, and intimacy, and requires the appropriate use of the power inherent in the health care provider’s role. The professional relationship between the nurse and client is based on a recognition that clients (or designates) are in the best position to make decisions about their lives when they are active and informed participants in the decision-making process.

**Trauma-informed care:** an approach to care that understands and considers the pervasive nature of trauma and promotes environments of healing and recovery rather than practices and services that may inadvertently re-traumatize. (Institute on Trauma and Trauma-Informed Care, 2015).

**Unregulated care providers:** Paid providers who are neither registered nor licensed by a regulatory body. They have no legally defined scope of practice. Unregulated care providers may not have mandatory education or practice standards. Unregulated care providers include health care aides, care attendants, home support workers, community health representatives, among others.
**Values:** The beliefs about the shared worth or importance of what is desired and esteemed within the nursing profession that nurses strive to uphold.

**Vulnerable clients and populations:** Those who tolerate a larger burden of illness and distress than others. Usually included in this group are the poor, homeless, immigrants, refugees, Indigenous persons, racialized persons, disabled persons, persons with stigmatizing conditions (physical and mental disabilities, mental illness, substance abuse), older adults, children and youth in disadvantaged conditions, persons with low literacy skills, women (particularly those in unsafe situations), and individuals who identify as lesbian, gay, bisexual, transgender, queer, or two-spirit.
References


