Entry-Level Competencies for Licensed Practical Nurses

2019

CCPNR
Canadian Council for
Practical Nurse Regulators

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Forward

The Canadian Council for Practical Nurse Regulators (CCPNR) is a federation of provincial and territorial members who are identified in legislation, and responsible for the safety of the public through the regulation of licensed practical nurses (LPNs)[1]. In 2012, CCPNR recognized the need to describe the competencies expected of the entry-level LPN in Canada. In 2013, CCPNR "Entry-to-Practice Competencies for LPNs" were published. In response to the changing health care environment, these competencies were updated in 2019. Now referred to as the CCPNR "Entry-Level Competencies for LPNs", this document describes the knowledge, skills, judgment and attitudes required of beginning practitioners to provide safe, competent and ethical nursing care.

A task force comprised of representatives from jurisdictions who license and/or regulate LPNs across Canada (with Quebec as an observer) led the project. This document was validated by the LPN community and key stakeholder groups across Canada and was approved by the Boards of the respective regulatory authorities of the CCPNR's Board members.

The entry-level competencies (ELCs) are applicable in Canadian provinces or territories that have adopted or enacted them in accordance and consistent with applicable laws for that jurisdiction. For specific information, consult the provincial/territorial regulatory authority.

Introduction

This document describes the ELCs expected of the LPN in Canada. Entry-level LPNs are at the point of initial registration or licensure, following graduation from an approved practical nursing education program. ELCs are used by LPN regulators and other stakeholders for a number of purposes including:

- Practical nursing education program approval/recognition
- Development of standards
- Practice assessment and measurement of initial applicants and current registrants
- Professional conduct review
- Competency-based assessments
- Curriculum development
- Exam development
- Practice consultation
- Stakeholder information
- A resource for employers and the public to promote awareness of the practice expectations of the entry-level licensed practical nurse.

Entry-level LPNs are beginning practitioners whose level of practice, autonomy and proficiency will be enhanced through reflective practice, evidence-informed knowledge, collaboration, mentoring and support from colleagues (e.g. managers, other healthcare team members and employers). Through formalized and informal ongoing education and practice experience, LPNs expand their knowledge base and competence throughout their career. This additional learning and professional growth after becoming licensed is not reflected in this document.

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[1]*For the purposes of this document, the term "licensed practical nurse" also refers to "registered practical nurse."*

Each province and territory is responsible for ensuring graduates of practical nursing programs in Canada and nurses educated in other countries applying for licensure as an LPN meet the minimum level of competence before they begin practice, informed in part by the ELCs.

LPN stakeholders with a specific understanding of entry-to-practice competence were consulted as part of the 2019 update. Focus groups with LPN educators, supervisors and new graduates from across the country (in both official languages) were conducted in early 2019. Participants were asked to share their views on what changes in the profession had occurred over the past five years and what, if any, modifications should be made to the 2013 version. Feedback was reviewed by the task force who adjusted existing and/or added new ELCs accordingly. A draft set of ELCs was then validated through a national survey yielding over 14,000 responses.

Assumptions

The following are a set of assumptions that are understood to apply to the practice of practical nursing in Canada and to the ELCs that follow.

- The foundation of practical nursing is defined by:
  - entry-level competencies;
  - professional nursing standards of practice of the regulatory authority;
  - nursing code(s) of ethics/ethical standards;
  - scope of nursing practice applicable in the jurisdiction; and
  - provincial/territorial and federal legislation and regulations that direct practice.

- LPN practice is built upon the four concepts of person, environment, health and nursing and is grounded within the context of the current Canadian healthcare system, primary health care and emerging health trends.

- LPNs possess competencies that are transferable across all areas of responsibility (e.g. direct care, administration, education and research).

- LPNs are active participants in health promotion, illness prevention and harm reduction activities.

- LPNs practise in any setting or circumstance where healthcare is delivered.

- Requisite skills and abilities are required to attain the LPN ELCs.

- LPNs practise autonomously, safely, competently and ethically along the continuum of care in situations of health and illness across a client's lifespan.

- LPNs practise in situations of varying complexity and work collaboratively with the healthcare team to maximize client outcomes.

- LPNs demonstrate leadership by fostering continued self-growth to meet the challenges of an evolving healthcare system.

- LPNs follow a systematic approach by using the nursing process to deliver safe, competent and ethical care.

- LPNs advocate for the implementation and utilization of evidence-informed practice.

Entry-Level Competencies

The 76 entry-level competencies are organized in five categories: 1) professional practice, 2) legal practice, 3) ethical practice, 4) foundations of practice and 5) collaborative practice. The order of the categories and **competencies** is not an indication of priority or importance. Terms in bold text are defined in the glossary at the end of the document.

Professional Practice

Licensed practical nurses adhere to **practice standards** and an ethical framework. They are responsible and accountable for safe, competent and ethical nursing practice. They are expected to demonstrate professional conduct as reflected through personal attitudes, beliefs, opinions and actions. Licensed practical nurses focus on personal and professional growth. Licensed practical nurses are expected to utilize knowledge, **critical thinking**, **critical inquiry** and research to build an **evidence-informed practice**.

1. Demonstrates accountability and accepts responsibility for own decisions and actions.
2. Practises **autonomously** within legislated **scope of practice**.
3. Displays self-awareness and recognizes when to seek assistance and guidance.
4. Adheres to regulatory requirements of jurisdictional legislation.
5. Practises within own level of **competence**.
6. Initiates, maintains and terminates the **therapeutic nurse-client relationship**.
7. Provides **client** care in a non-judgmental manner.
8. Adapts practice in response to the spiritual beliefs and cultural practices of clients.
9. Supports clients in making informed decisions about their healthcare and respects their decisions.
10. Engages in self-reflection and continuous learning to maintain and enhance competence.
11. Integrates relevant evidence into practice.
12. Collaborates in the analysis, development, implementation and evaluation of practice and policy.
13. Integrates continuous **quality improvement** principles and activities into nursing practice.
14. Demonstrates a professional presence, honesty, integrity and respect in all interactions.
15. Demonstrates **fitness to practice**.
16. Maintains current knowledge about trends and issues that impact the client, the licensed practical nurse, the healthcare team and the delivery of health services.
17. Identifies and responds to inappropriate behaviour and incidents of **professional misconduct**.
18. Recognizes, responds and reports own and others' **near miss**es, errors and **adverse event**s.
19. Distinguishes between the mandates of **regulatory bodies**, professional associations and unions.

Ethical Practice

Licensed practical nurses use ethical frameworks (e.g. Code of Ethics, ethical standards) when making professional judgments and practice decisions. They engage in critical thinking and critical inquiry to inform decision-making and use self-reflection to understand the impact of personal values, beliefs and assumptions in the provision of care.

20. Establishes and maintains **professional boundaries**.
21. Takes action to minimize the impact of personal values and assumptions on interactions and decisions.
22. Demonstrates respect for the values, opinions, needs and beliefs of others.
23. Applies ethical frameworks and reasoning to identify and respond to situations involving moral and ethical conflict, dilemma or distress.
24. Obtains knowledge of and responds to the *Calls to Action of the Truth and Reconciliation Commission of Canada*.[2]
25. Preserves the dignity of clients in all personal and professional contexts.
26. **Advocate**s for equitable access, treatment and allocation of resources, particularly for vulnerable and/or **diverse** clients and populations.
27. Advocates for clients or their representatives especially when they are unable to advocate for themselves.

Legal Practice

Licensed practical nurses adhere to applicable provincial/territorial and federal legislation and regulations, professional standards and employer policies that direct practice. They engage in professional regulation by enhancing their competence, promoting safe practice and maintaining their fitness to practice. Licensed practical nurses recognize that safe nursing practice includes knowledge of relevant laws and legal boundaries within which the licensed practical nurse must practise.

28. Practises according to legislation, practice standards, ethics and organizational policies.
29. Practises according to relevant mandatory reporting legislation.
30. Recognizes, responds and reports questionable orders, actions or decisions made by others.
31. Adheres to the **duty to report**.
32. Protects clients' rights by maintaining confidentiality and privacy in all personal and professional contexts.
33. Respond to the clients' right to healthcare information in accordance with relevant privacy legislation.
34. Documents according to established legislation, practice standards, ethics and organizational policies.
35. Obtains **informed consent** to support the client's informed decision-making.

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[2]*See: Truth and Reconciliation Commission of Canada: Calls to Action - http://trc.ca/assets/pdf/Calls_to_Action_English2.pdf*

Foundations of Practice

Licensed practical nurses use critical thinking, reflection, and evidence integration to assess clients, plan care, implement interventions and evaluate outcomes and processes. Foundational knowledge includes: nursing theory, health sciences, humanities, pharmacology and ethics.

36. Completes comprehensive **health assessment**s of clients across the lifespan.
37. Selects and utilizes information and communication technologies (ICTs) in the delivery of client care.
38. Researches and responds to relevant **clinical data**.
39. Engages in evidence-informed practice by considering a variety of relevant sources of information.
40. Comprehends, responds to and reports assessment findings.
41. Formulates clinical decisions consistent with client needs and priorities.
42. Identifies **nursing diagnosis**.
43. Develops the care plan with the client, **healthcare team** and others.
44. Implements nursing interventions based on assessment findings, client preferences and desired outcomes.
45. Responds to clients' conditions by organizing competing priorities into actions.
46. Assesses clients' **health literacy**, knowledge and readiness to learn.
47. Assesses, plans, implements and evaluates the teaching and learning process.
48. Provides information and access to resources to facilitate health education.
49. Evaluates the effectiveness of health education.
50. Applies principles of **client safety**.
51. Engages in quality improvement and **risk management** to promote a quality practice environment.
52. Evaluates the effectiveness of nursing interventions by comparing actual outcomes to expected outcomes.
53. Reviews and revises the plan of care and communicates accordingly.
54. Assesses implications of own decisions.
55. Uses critical thinking, critical inquiry and **clinical judgment** for decision-making.
56. Demonstrates professional judgment in utilizing information and communication technologies (ICTs) and **social media**.
57. Recognizes high risk practices and integrates mitigation strategies that promote safe care.
58. Applies strategies to prevent, de-escalate and manage disruptive, aggressive or violent behaviour.
59. Recognizes and responds immediately when a client's condition is deteriorating.
60. Demonstrates knowledge of nursing theory, pharmacology, health sciences, humanities and ethics.

Collaborative Practice

Licensed practical nurses work collaboratively with clients and other members of the healthcare team. They recognize that collaborative practice is guided by shared values and accountability, a common purpose or care outcome, mutual respect and effective communication.

61. Engages clients in identifying their health needs, strengths, capacities and goals.
62. Communicates collaboratively with the client and the healthcare team.
63. Provides essential client information to the client and the healthcare team.
64. Promotes effective interpersonal interaction.
65. Uses **conflict resolution** strategies to promote healthy relationships and optimal client outcomes.
66. Articulates own role based on legislated scope of practice, individual competence and care context including employer policies.
67. Determines their own professional and **interprofessional** role within the team by considering the roles, responsibilities and the scope of practice of others.
68. Advocates for the use of Indigenous health knowledge and healing practices in **collaboration** with the client.
69. Demonstrates **leadership**, direction and supervision to **unregulated health workers** and others.
70. Participates in emergency preparedness and disaster management.
71. Participates in creating and maintaining a quality practice environment that is healthy, respectful and psychologically safe.
72. Fosters an environment that encourages questioning and exchange of information.
73. Initiates and fosters mentoring relationships.
74. Applies the principles of team dynamics and group processes in interprofessional team collaboration.
75. Demonstrates formal and **informal leadership** in practice.
76. Organizes workload, assigns/coordinates nursing care, sets priorities and demonstrates effective time management skills.

Glossary

Glossary Term	Definition	Reference
Adverse event	An event that results in unintended harm to the patient, and is related to the care and/or services provided to the patient rather than to the patient's underlying medical condition.	Adapted from Canadian Patient Safety Institute (2015). Patient safety and incident management toolkit. Available at https://www.patientsafetyinstitute.ca/en/toolsResources/PatientSafetyIncidentManagementToolkit/Pages/Glossary.aspx
Advocate	To speak or act on behalf of self or others.	Adapted from: Canadian Nurses Association (2010). Canadian Nurse Practitioner Core Competency Framework. Available at https://www.cna-aiic.ca/~/media/cna/files/en/competency_framework_2010_e.pdf
Autonomous practice	Autonomous practice means having the authority to make decisions and the freedom to act in accordance with one's professional knowledge base.	Skår, R. (2010). The meaning of autonomy in nursing practice. Journal of clinical nursing. 19, 2226-2234. https://doi.org/10.1111/j.1365-2702.2009.02804.x
Autonomy	The freedom to act in accordance with self-chosen and informed goals. It includes making independent decisions about client care within one's role and legislated scope of practice.	Adapted from: Skår, R. (2010). The meaning of autonomy in nursing practice. Journal of clinical nursing. 19, 2226-2234. https://doi.org/10.1111/j.1365-2702.2009.02804.x
Client	An individual (or designated representative), family, group or community.	Canadian Practical Nurse Registration Examination (2017). Examination Blueprint. Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf
Client safety	The reduction or mitigation of unsafe acts within the healthcare team and healthcare system as well as the use of best practices shown to lead to optimal client outcomes.	Adapted from: Canadian Patient Safety Institute (2017). General patient safety. Available at https://www.patientsafetyinstitute.ca/en/topic/pages/general-patient-safety.aspx

Glossary Term	Definition	Reference
Clinical data	All assessment and diagnostic results that apply to a client's health status. This includes data collected in a variety of ways to provide client information.	Adapted from: Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf
Clinical judgment	Processes that rely on critical inquiry to reflect the complex, intuitive and conscious thinking strategies that guide nursing decisions.	Adapted from: Canadian Practical Nurse Registration Examination (2017): Examination Blueprint. Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf
Collaboration	A joint communication and decision-making process with the expressed goal of working together toward identified outcomes while respecting the unique abilities and autonomy of each team member.	Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf.
Competence	The quality or ability of a practical nurse to integrate and apply the knowledge, skills, judgments and personal attributes required to practise safely and ethically in a designated role and setting. Personal attributes include, but are not limited to, attitudes, values and beliefs.	Adapted from: College of Nurses of Ontario (2014, rev. 2018). Entry-to-practice competencies for registered nurses. Available at http://www.cno.org/globalassets/docs/reg/41037_entrytopracitic_final.pdf
Competencies	The integrated knowledge, skills, behaviours, attitudes, critical thinking and clinical judgment expected of an entry-level licensed practical nurse to provide safe, competent and ethical care.	Adapted from: Canadian Council of Registered Nurse Regulators (2013). Competencies in the context of entry-level registered nurse practice. Available at https://www.ccrnr.ca/assets/jcp_rn_competencies_2012_edition.pdf and Frank, J. R., Snell, L., Sherbino, J., editors (2015). CanMEDS 2015 Physician Competency Framework. Ottawa: Royal College of Physicians and Surgeons of Canada. Available at http://canmeds.royalcollege.ca/uploads/en/framework/CanMEDS%202015%20Framework_EN_Reduced.pdf

Glossary Term	Definition	Reference
Conflict resolution	The process of arriving at a mutually agreeable solution to a dispute or conflict between two or more parties by adequately addressing the interests of all parties.	Adapted from: Canadian Interprofessional Health Collaborative (2010). A National Interprofessional Competency Framework. Available at https://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf
Critical inquiry	This term expands on the meaning of critical thinking to encompass critical reflection on actions. Critical inquiry refers to a process of purposive thinking and reflective reasoning whereby practitioners examine ideas, assumptions, principles, conclusions, beliefs and actions in the context of nursing practice. The critical inquiry process is associated with a spirit of inquiry, discernment, logical reasoning and application of standards.	Adapted from Brunt, B. A. (2005). Critical thinking in nursing: An integrated review. The journal of continuing education in nursing, 36(2), 60-67. and van Graan, A. C., Williams, M. J. S., & Koen, M. P. (2016). Professional nurses' understanding of clinical judgement: A contextual inquiry. Health SA Gesondheid, 21, 280-293. https://doi.org/10.1016/j.hsag.2016.04.001
Critical thinking	An active and purposeful problem-solving process. It requires the practical nurse to advance beyond the performance of skills and interventions to provide the best possible care, based on evidence-informed practice. It involves 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.	Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf
Diverse/diversity	Based on the understanding that each individual is unique, the concept of diversity encompasses acceptance and respect. These differences include culture, race, ethnicity, gender, sexual orientation, socio-economic status, age, physical abilities, religious beliefs, political beliefs and ideologies.	Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf

Glossary Term	Definition	Reference
Duty to report	Nurses have a legal and ethical duty to report incompetent or impaired practice or unethical conduct of regulated health professionals. Most provinces/territories have legislation setting out the duty for nurses to report situations in which there is a good reason to believe that a health professional's practice is impaired or incompetent and may pose a significant risk to the public. The duty to report also requires nurses to report any sexual misconduct of a health professional.	Adapted from British Columbia College of Nursing Professionals Practice Standards (2019) Duty to Report. Available at https://www.bccnp.ca/Standards/Documents/PS_DutytoReport.pdf
Evidence-informed practice	The ongoing process that incorporates evidence from research, clinical expertise, client preferences, and other available resources to guide practice decisions.	Adapted from: Canadian Nurses Association (2010). Position statement: Evidence-informed decision-making and nursing practice. Available at https://cna-aiic.ca/~/media/cna/page-content/pdf-en/ps113_evidence_informed_2010_e.pdf and Canadian Council for Practical Nurse Regulators (2013). Entry-to-Practice Competencies for Licensed Practical Nurses. Available at https://www.ccpnr.ca/wp-content/uploads/2013/09/IJLPN-ETPC-Final.pdf
Fitness to practice	All the qualities and capabilities of an individual relevant to their practice as a nurse, including but not limited to freedom from any cognitive, physical, psychological or emotional condition and dependence on alcohol or drugs that impairs their ability to practise nursing.	Canadian Nurses Association (2017). Code of ethics for registered nurses. Available at https://cna-aiic.ca/~/media/cna/page-content/pdf-en/code-of-ethics-2017-edition-secure-interactive.pdf?la=en.
Health assessment	A process to obtain data on the client that includes a complete history of the client's health status as well as a comprehensive assessment.	Adapted from: Perry, A., Potter, P., & Ostendorf, W. (2018). Clinical nursing skills and techniques (9th ed.). St. Louis: Mosby

Glossary Term	Definition	Reference
Healthcare team	Clients, families, healthcare professionals, unregulated health workers, students, volunteers, educators, spiritual leaders and others who may be involved in providing care.	Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf
Health literacy	The ability to find, access, read, and understand reliable health information and to use that information to make informed decisions about their health.	Potter, P. A., Perry, A. G., Stockert, P., Hall, A., Astle, B. J., & Duggleby, W. (2019). Canadian Fundamentals of Nursing, (6th ed.). Toronto: Mosby
Informed consent	A legal condition whereby a person gives permission for interventions based upon a clear understanding of the facts, risks, implications, potential future consequences, and expected outcomes of an action.	Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf
Interprofessional collaboration	Interprofessional collaboration is the process of developing and maintaining effective working relationships with learners, practitioners, patients/clients/families and communities to enable optimal health outcomes.	Adapted from: Canadian Interprofessional Health Collaborative (2010). A National Interprofessional Competency Framework. Available at https://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf
Leadership (formal)	Leadership defined by title, position, or organizational role. Where followers are motivated and empowered to achieve individual and common goals through a formalized relationship that is democratic and collegial.	Adapted from: AL-Dossary, R. N. (2017). Leadership in Nursing. Contemporary Leadership Challenges, 251. DOI: 10.5772/65308 and Summerfield, M. R. (2014). Leadership: A simple definition. American Journal of Health-System Pharmacy, 71(3), 251-253. https://doi.org/10.2146/ajhp130435

Glossary Term	Definition	Reference
Leadership (informal)	Informal leaders are self-aware individuals who, while not holding formal leadership positions, are accessible, collaborative, and demonstrate professional competence while inspiring creativity through encouragement and influence.	Adapted from: Heard, C. P., Scott, J., McGinn, T., Van Der Kamp, E., & Yahia, A. (2018). Informal Leadership in the Clinical Setting: Occupational Therapist Perspectives. The Open Journal of Occupational Therapy, 6(2). https://doi.org/10.15453/2168-6408.1427 and Douglas Lawson, T., Tecson, K. M., Shaver, C. N., Barnes, S. A., & Kavli, S. (2019). The impact of informal leader nurses on patient satisfaction. Journal of nursing management, 27(1), 103-108. https://doi.org/10.1111/jonm.12653 and Baghurst, T., & Stincelli, E. (2014). A grounded theory exploration of informal leadership qualities as perceived by employees and managers in small organizations. International Journal of Business Management and Economic Research, 5(1), 1-8.
Near miss	An event that reaches the patient but does not result in harm. Related to a "No-Harm Event".	Adapted from: Canadian Patient Safety Institute (2015). Patient safety and incident management toolkit. Available at https://www.patientsafetyinstitute.ca/en/toolsResources/Patient-SafetyIncidentManagementToolkit/Pages/Glossary.aspx
Nursing diagnosis	A clinical judgment concerning a human response to health conditions/life processes, or a vulnerability for that response, by an individual, family, group or community. A nursing diagnosis provides the basis for selection of nursing interventions to achieve outcomes for which the nurse has accountability.	The International Nursing Knowledge Association (NANDA) (2013). Available at http://www.nanda.org/nanda-i-resources/glossary-of-terms/ Note: Provincial regulatory legislation may provide a jurisdictional specific definition for this term.

Glossary Term	Definition	Reference
Professional boundaries	The space between the nurse's power and the patient's vulnerability and the defining lines which separate the therapeutic behaviour of nurses from behaviours which, well-intentioned or not, can reduce the benefit of care to clients.	Adapted from: College & Association of Registered Nurses of Alberta (2011). Professional Boundaries for Registered Nurses. Available at https://www.nurses.ab.ca/docs/default-source/document-library/guidelines/rn_professional-boundaries.pdf?sfvrsn=cc43bb24_12
Professional misconduct	Behaviour outside the boundaries of what is considered acceptable or worthy of its membership by the governing body of a profession.	Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf
Quality improvement	A systematic, formal approach to the analysis of practice performance and efforts to improve performance.	Adapted from Canadian Patient Safety Institute (n.d.). Patient Safety and Incident Management Toolkit. Available at https://www.patientsafetyinstitute.ca/en/toolsResources/Patient-SafetyIncidentManagementToolkit/Pages/Glossary.aspx and American Academy of Family Physicians (2015). Basics of Quality Improvement. Available at https://www.aafp.org/practice-management/improvement/basics.html
Regulatory bodies/authorities	Canadian provincial and territorial bodies responsible for the regulation of licensed practical nurses.	No reference required
Risk management	The ability to identify potential risks, recognize implications and respond appropriately.	Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf
Scope of practice	The roles, responsibilities, functions and abilities which LPNs are educated and authorized to perform. It is determined through provincial legislation set in individual jurisdictions.	Adapted from: Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf

Glossary Term	Definition	Reference
Social media	The use of the Internet to post or publish information and/or to participate in discussions. This includes (but is not limited to) websites, social networks, online forums, texting, chat rooms, listservs, blogs, wikis, photo, video and audio file-sharing sites and virtual worlds.	Adapted from: Bodell, S. & Hook, A. (2014). Developing online professional networks for undergraduate occupational therapy students: An evaluation of an extracurricular facilitated blended learning package. British Journal of Occupational Therapy, 77(6), 320-323. https://doi.org/10.4276/030802 214X14018723138156
Standards of practice/ practice standards	The expectations for nurses that contribute to public protection. They inform nurses of their accountabilities and the public of what to expect of nurses. The standards apply to all nurses regardless of their role, job description or area of practice.	Adapted from: College of Nurses of Ontario (2019). Standards and guidelines. Available at http://www.cno.org/en/learn-about-standards-guidelines/standards-and-guidelines/ Note: Provincial regulatory legislation may provide a jurisdictional specific definition for this term.
Therapeutic nurse-client relationship	A relationship based on trust, respect and intimacy with the client that requires the appropriate use of power. A relationship a nurse establishes and maintains with a client, through the use of professional knowledge, skills and attitudes, to provide nursing care expected to contribute to the client's wellbeing.	Canadian Nurses Association (2017). Code of ethics for registered nurses. Available at https://cna-aiic.ca/~/media/cna/page-content/pdf-en/code-of-ethics-2017-edition-secure-interactive.pdf?la=en.
Unregulated health worker	A healthcare worker who is not part of a regulated health profession, and who provides care to clients under the guidance of a regulated health professional/employer.	Canadian Nurses Association (2008). Unregulated health workers: A Canadian and global perspective. Available at https://cna-aiic.ca/-/media/cna/page-content/pdf-en/unregulated_health_workers_04_2008_e.pdf?la=en&hash=59B29E7FAF90ABB5C558CC9DF00D40F9E15ADF6F

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