



# Standards of Practice for Licensed Practical Nurses on Continuing Competence

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College of LPNs and HCAs of Alberta

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## INTRODUCTION

The College of Licensed Practical Nurses and Health Care Aides of Alberta (CLHA) has the authority under the *Health Professions Act* (HPA) to carry out its activities and govern Licensed Practical Nurses (LPNs)\* in a manner that protects and serves the public interest.

Terms found in the definition section are **bolded** where they appear for the first time in this document.

## STANDARDS OF PRACTICE AND THE HPA

Under the HPA, LPNs must follow their profession's standards of practice. Standards of practice outline the minimum level of behaviour that LPNs are expected to meet in their professional practice. Standards of practice can be enforced under the HPA. Any action or behaviour that does not follow these standards of practice could be considered **unprofessional conduct** and may result in disciplinary action by the CLHA.

Part 3 of the HPA outlines the requirements for regulatory colleges to establish a Continuing Competence Program (CCP). Section 50(2)(a) of the HPA outlines that the purpose of a CCP is to maintain the **competence** of LPNs and to enhance the provision of professional services.

The CLHA's Continuing Competence Program (CCP) improves the delivery of care to clients as it requires LPNs to complete education for professional development. Each year, LPNs on the general register must complete a self-assessment, **learning plan**, and indicate how the plan was implemented and evaluated. It also requires the LPN to participate in audits and practice assessments. Where there is noncompliance, **conditions** may be imposed on the LPN's practice permit as stated in the HPA section 40.1(1).

Please see the *Continuing Competence Program Guide for LPNs* for more detailed program requirements.

### Expected Outcomes

- LPNs develop, maintain, and improve their competence and delivery of **professional services** through self-directed learning.
- LPNs apply the learned knowledge and skills in their practice to improve client outcomes.
- LPNs provide **evidence** of learning and compliance with the CCP as requested by the CLHA.

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\* In this document, "LPN(s)" has the same meaning as "regulated member(s)" in the *Health Professions Act*.

## STANDARD 1: CONTINUING COMPETENCE PROGRAM

- 1.0. LPNs on the **general register** must complete the CCP activities every year, including a self-assessment, learning plan, implementation, and evaluation of learning.
  - 1.1. For the purposes of section 50 of the HPA, a CCP of the CLHA establishes that:
    - 1.1.1. the requirements of the CCP are those set out in this standard.
    - 1.1.2. standard 1.1.1 does not limit the power of the Registrar to issue guidance to LPNs detailing specific program requirements.
    - 1.1.3. the Registrar’s powers may be delegated to the **Competence Committee**.
  - 1.2. LPNs on the general register must complete the CCP on an annual basis.
  - 1.3. If requested by the Registrar, LPNs must submit the documents outlined in standard 1.4 in a manner and form satisfactory to the Registrar.
  - 1.4. To complete the CCP, LPNs must annually prepare the following documents:
    - 1.4.1. a self-assessment based on standards of practice indicating continuing competence activities to be undertaken for the next registration year;
    - 1.4.2. a learning plan that states the continuing competence goals for the next registration year; and
    - 1.4.3. evidence of continuing competence activities, including:
      - a) a list of self-directed learning undertaken during the past registration year,
      - b) completion of any mandatory education directed by the Council, and
      - c) keeping track of and practicing for a minimum of 1,000 practice hours during the previous four registration years or other equivalent practice experience as established by the Council in the *Actively Engaged Requirements* policy.
  - 1.5. For the purpose of standard 1.4.3(c), “other equivalent practice experience” means any of the following completed during the previous four registration years:
    - 1.5.1. graduation from a practical nurse diploma program or refresher program approved by the Council;
    - 1.5.2. graduation from a program deemed substantially equivalent by the Registrar to a program in standard 1.5.1; or

- 1.5.3. passing a **clinical examination** approved by the Council.
- 1.6. Document the completed learning activities to meet the LPN's self-assessed learning needs.
- 1.7. Document how the learning has affected and/or improved the LPN's practice.
- 1.8. LPNs must retain copies of the evidence of their compliance with the CCP, including copies of any self-assessment, learning plan, and how the plan was implemented and evaluated, for at least the four registration years prior to the current registration year.

## **STANDARD 2: COMPLIANCE TO CONTINUING COMPETENCE PROGRAM AUDIT**

- 2.0 LPNs may be selected for a **program audit** based on the CCP requirements.
- 2.1 The Registrar may select LPNs for a program audit.
- 2.1.1 A program audit evaluates and reviews an LPN's compliance with the CCP.
- 2.1.2 The Registrar's powers to conduct an audit may be delegated to the Competence Committee.
- 2.2 If requested by the Registrar, LPNs selected for a program audit must:
- 2.2.1 submit evidence respecting the LPNs compliance with the CCP; and
- 2.2.2 answer questions from the Registrar respecting the LPN's compliance with the CCP.
- 2.3 Following the completion of a program audit, LPNs must comply with any remedial requirements directed by the Registrar, including submitting evidence of having undertaken additional continuing competence activities. Conditions may be placed on an LPN's practice permit as stated in the HPA section 40.1(1).
- 2.3.1 Remedial requirements must be completed within a period of time specified by the Registrar.
- 2.3.2 **Remedial learning** requirements may include:
- (a) completing specific CCP requirements,
  - (b) completing additional learning activities,
  - (c) providing evidence of continued learning and competence,
  - (d) answering questions respecting continued learning and competence,
  - (e) submitting to a periodic review and evaluation by the Registrar,
  - (f) reporting to the Registrar on specified matters related to the CCP, and
  - (g) any other remedial requirements the Registrar considers appropriate.

## Conditions on a Practice Permit

If there is noncompliance with the CCP requirements, the Registrar, Registration Committee, or Competence Committee can impose conditions on the LPN's practice permit in accordance with section 40.1 of the HPA. The conditions that may be imposed include, but are not limited to, the following:

- (a) the LPN practices under supervision;
- (b) the LPN's practice be limited to specified professional services or to specified areas of the practice;
- (c) the LPN refrains from performing specified restricted activities;
- (d) the LPN refrains from engaging in **sole practice**;
- (e) the LPN submits to additional practice visits or other assessments;
- (f) the LPN reports to the Registrar on specified matters on specified dates;
- (g) the practice permit is valid only for a specified purpose and time;
- (h) the LPN is prohibited from supervising students, other regulated members, or other health providers; and
- (i) the LPN completes the continuing competence requirements within a specified time.

## DEFINITIONS

**Clinical examination:** an evaluation of an LPN's competence to perform the skills of an LPN in a simulated clinical setting.

**Competence Committee:** a committee responsible for making recommendations to the CLHA Council on CCP requirements, conducting competence assessments, and addressing related issues/concerns to ensure the continued competence of members.

**Competence:** the ability to apply the knowledge, skills, behaviours, judgments, and personal attributes required to practice safely and ethically. Personal attributes include attitudes, values, and beliefs.

**Condition:** a restriction, requirement, or limitation placed on an LPN's practice permit. A condition is placed on a practice permit when the CLHA has additional requirements for an LPN either in their practice as an LPN or in their communication with the CLHA to maintain registration.

**Evidence:** facts, information, documents, etc. that give reason to believe that something is true (e.g. an LPN keeping a record of their learning plan to prove they completed it during their audit).

**General register:** a register category for applicants who meet the standard eligibility requirements to practice as an LPN independently or who are eligible for registration as a result of being registered in another Canadian jurisdiction or after being assessed as having substantially equivalent competence.

**Learning Plan:** a written plan outlining the educational or training activities an LPN must complete to meet the requirements of the CCP.

**Professional service:** defined in the *Health Professions Act* as a service that falls within the practice of an LPN. This includes one or more of the following:

- apply nursing knowledge, skills and judgment to assess clients' needs;
- provide nursing care for clients and families;
- teach, manage and conduct research in the science, techniques and practice of nursing; and/or
- provide restricted activities authorized by the regulations.

**Program audit:** evaluates and reviews an LPN's compliance with the CCP.

**Remedial learning:** refers to one or more activities that the CLHA requires the LPN to complete to address and correct the LPN's completion of the CCP. This occurs when an LPN fails to complete part of the CCP or misrepresents their completion of the program. Remedial learning activities help LPNs understand their responsibilities and accountabilities; learn from their mistakes; and address gaps in their competencies, skills, and behaviours. An example is completing specific coursework or a summary to demonstrate compliance with the CCP.

**Sole practice:** when an LPN works independently without being connected to an employer, organization, or supervisor. This includes self-employed practice, where the LPN runs their own business and is fully responsible for client care and meeting all necessary regulations.

**Unprofessional Conduct:** according to the HPA, unprofessional conduct includes displaying a lack of knowledge, skill, or judgment when providing professional services; not following the LPN standards of practice and code of ethics; failing to comply with requirements of the CCP; or any other behaviour that is defined as unprofessional conduct under section 1(1)(pp) of the HPA.

## REFERENCES

Canadian Council for Practical Nurse Regulators (CCPNR). Entry-Level Competencies for Licensed Practical Nurses. 2019.

College of Licensed Practical Nurses and Health Care Aides of Alberta (CLPNA). Standards of Practice for Licensed Practical Nurses on Boundary Violations. 2023.

College of Licensed Practical Nurses and Health Care Aides of Alberta (CLPNA). Standards of Practice for Licensed Practical Nurses on Restricted Activities, Advanced Practice, and Supervision. 2023.

Health Professions Act, RSA 2000, c H-7, s 1(1)(ff).