Standards of Practice for Licensed Practical Nurses on Continuing Competence

Effective Date:
College of LPNs and HCAs of Alberta

CLHA
College of LPNs and HCAs of Alberta

TABLE OF CONTENTS

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

The CLHA's Continuing Competence Program (CCP) improves the delivery of care to clients by having a program that requires LPNs to complete education for professional development. The CCP includes the LPN completing a self-directed **learning plan**, yearly education, and participating in audits and practice assessments. LPNs must review and follow the accompanying *Continuing Competence Program Guide for LPNs* for more detailed program requirements.

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. Where there is noncompliance, **condition**s may be imposed on the practice permit, including completing the continuing **competence** requirements within a specified time in accordance with section 40.1 of the HPA. Please see Part 3 of the HPA for further information about the CCP.

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.

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

STANDARD 1: LPN 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.

Performance Expectations

LPNs must:

1.1. self-assess their learning needs using the applicable standards of practice.

1.2. develop a learning plan that states the continuing competence goals for the next registration year and how they will be achieved.

1.3. document the updated learning plan and the reason for any changes if the learning plan changed from the initial plan.

1.4. document the completed learning activities to meet their self-assessed learning needs.

1.5. document how the learning has affected and/or improved their practice.

1.6. keep evidence of completing the CCP for the four years prior to the current registration year.

This includes:

a) keeping a list of self-directed learning taken during each of those four years;
b) completion of any mandatory education as directed by Council; and
c) keeping track of and practicing for a minimum of 1,000 practice hours in the previous four years, as established by Council in the *Actively Engaged Requirements* policy.

1.7. submit documents requested by the CLHA within the timelines specified in the communications sent from CLHA. For more information, please refer to the *Continuing Competence Program Guide for LPNs*.

1.8. complete any required learning activities as set out by the CLHA.

STANDARD 2: CONTINUING COMPETENCE PROGRAM AUDIT

2.0 LPNs may be selected for a **program audit** based on the CCP requirements.

Performance Expectations

By the deadline specified by the CLHA, LPNs must:

2.1 submit evidence of compliance with the CCP.

2.2 communicate with the CLHA regarding their compliance with the CCP.

2.3 following the completion of a program audit, LPNs must complete any required **remedial learning**, including submitting evidence of having undertaken additional continuing competence activities.

2.4 complete any remedial learning or activities as directed by the CLHA.

Following a Program Audit

After an audit, an LPN may be directed to do one or more of the following:

(a) complete CCP requirements (mandatory learning activities assigned as part of the CCP),
(b) complete additional learning activities (activities chosen by the LPN to support their own professional development),
(c) provide evidence of continued learning and competence,
(d) answer questions respecting continued learning and competence,
(e) submit to a periodic review and evaluation by the Registrar,
(f) report to the Registrar on specified matters related to the CCP, and
(g) any other remedial requirements the Registrar considers appropriate.

STANDARD 3: PRACTICE ASSESSMENTS

3.0 LPNs may be selected for practice assessments and must comply with the requests of the CLHA, **Competence Committee**, or any person appointed by the Competence Committee.

Performance Expectations

LPNs must:

3.1 Participate in and meet any requirements as directed by the CLHA, which include:

a) practice visits,
b) interviews,
c) observations, and/or
d) any other assessments outlined in legislation.[1]

3.2 Complete any required remedial learning activities, as directed, following a practice assessment by the specified deadline.

Note: It is crucial to finish this learning. An unsatisfactory result from the practice assessment may lead to conditions being placed on a practice permit by the Registrar, Complaints Director, Registration Committee, or Competence Committee, as outlined in section 40.1 of the HPA.

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.

[1] *Health Professions Act,* 50(2)

* In this document, sole practice is the term used in the *Health Professions Act* and has the same meaning as self-employed practice defined in CLHA documents

DEFINITIONS

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.

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.

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 services: 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 is self-employed (including as a contracted provider) and is fully responsible for client care.

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) of the HPA.