Entry-to-Practice Competencies for Licensed Practical Nurses
Foreword

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).

The Council of the CCPNR recognized the need to describe the competencies expected of the entry-level LPN in Canada. The competencies describe the knowledge skill, judgment and attitude required of beginning practitioners to provide safe competent and ethical nursing care. The document serves as a guide for curriculum development and for public and employer awareness of the practice expectations of the entry-level LPN.

A steering committee from the representatives of all jurisdictions who license and/or regulate LPNs across Canada (with the exception of Quebec) was identified to guide and advise the project. Assessment Strategies Inc. was commissioned to research and develop the competencies in collaboration with the steering committee. 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 CCPNR thanks all participants who contributed to the creation of this document and acknowledges the College of Nurses of Ontario, the National Council of State Boards of Nursing, the Canadian Nurses Association and the Australian Nursing and Midwifery Council for the consultative use of their competency profiles in the creation of this entry-to-practice competency document.

The CCPNR approves and adopts the entry to practice competencies for the entry-level LPN outlined in this document.

For the purposes of this document, the term “licensed practical nurse” also refers to “registered practical nurse.”

This document is only applicable in Canadian provinces or territories that have adopted or enacted these requisite skills and abilities as regulatory requirements for practical nursing in that jurisdiction in accordance and consistent with applicable law for that jurisdiction.

The opinions and interpretations in this publication are those of the author and do not necessarily reflect those of the Government of Canada.

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# Table of Contents

INTRODUCTION .................................................................................................................. 4

PRINCIPLES OF PRACTICAL NURSING PRACTICE .................................................. 4
  Foundation .................................................................................................................. 4
  Initial Expectations ................................................................................................. 4
  Accountability ......................................................................................................... 5
  Quality of Care ......................................................................................................... 5
  Collaboration ........................................................................................................... 6

COMPETENCIES ........................................................................................................... 6

PROFESSIONAL PRACTICE ....................................................................................... 6

ETHICAL PRACTICE .................................................................................................... 7

LEGAL PRACTICE ........................................................................................................ 8

FOUNDATIONS OF PRACTICE .................................................................................. 9

COLLABORATIVE PRACTICE ..................................................................................... 10

GLOSSARY .................................................................................................................. 11

REFERENCES .............................................................................................................. 16
Introduction

This document describes the competencies expected of the entry-level licensed practical nurse in Canada. The competencies describe the knowledge skill, judgment and attitude required of beginning practitioners to provide safe competent and ethical nursing care. The document serves as a guide for curriculum development and for public and employer awareness of the practice expectations of the entry-level licensed practical nurse.

Through formalized and ongoing education, licensed practical nurses may expand their knowledge base and/or competencies throughout their career. This additional learning is not reflected in this document.

Each province and territory is responsible for ensuring that graduates of practical nursing programs in Canada and nurses educated in other countries applying for licensure as a practical nurse meet an acceptable level of competence before they begin to practise.

Prior to producing this document, an extensive study was conducted to identify the competencies required for the safe, competent and ethical practice of entry-level licensed practical nurses in Canada. Provincial and territorial regulatory authorities were active participants in all phases of the investigation, which served to identify and validate a comprehensive set of competencies expected of the entry-level licensed practical nurse. With this set of competencies and the validation survey data, the essential components of the entry-to-practice document were developed.

Principles of practical nursing practice

Foundation

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

2. Practical nursing 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.

3. Licensed practical nurses possess competencies that are transferable across diverse practice settings.

4. Licensed practical nurses may practise in any setting or circumstance where health care is delivered (e.g., hospitals, communities, homes, clinics, schools, industrial/occupational health settings, long-term care settings, residential facilities and correctional facilities).

Initial expectations

5. Entry-level licensed practical nurses 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 health-care team members and employers).

6. Requisite skills and abilities are required to attain the licensed practical nurse entry-level competencies.

7. Entry-level competencies represent the integrated nursing knowledge, skills, behaviours, attitudes, critical thinking, inquiry\(^3\) and clinical judgments required by licensed practical nurses across Canada.

8. Entry level competencies have a strong foundation in nursing theory, nursing knowledge critical thinking, health sciences, humanities, evidence-informed practice and ethics.

**Accountability**

9. Licensed practical nurses are responsible and accountable for their decisions and actions.

10. Licensed practical nurses engage in self-reflection and continuous learning to maintain and enhance competence.

11. Licensed practical nurses are accountable and responsible for assessing their individual fitness to practice.

12. Licensed practical nurses demonstrate and apply knowledge of the distinction between ethical responsibilities and legal rights.

**Quality of care**

13. Licensed practical nurses practise safely, competently and ethically along the continuum of care in situations of health and illness across a client’s lifespan.

14. Licensed practical nurses provide, facilitate and promote safe, competent and ethical care while respecting client diversity.

15. Licensed practical nurses demonstrate formal and informal leadership in all aspects of practice.

16. Licensed practical nurses follow a systematic approach to deliver safe, competent and ethical care by using the nursing process.

17. Licensed practical nurses maintain current knowledge about trends and issues that impact the client, the licensed practical nurse, the health-care team and the delivery of health services.

18. Licensed practical nurses practise collaboratively, while respecting the shared and unique competencies of other members of the health-care team.


20. Licensed practical nurses are active participants in health promotion, illness prevention and harm reduction activities.

21. Licensed practical nurses are active participants in quality assurance/quality improvement and risk management activities.

\(^3\) The level of critical inquiry expected of entry level licensed practical nurses varies in each jurisdiction.
Collaboration

22. Licensed practical nurses collaborate with the client and/or alternate decision-maker in the decision-making process related to the person’s health.

23. Licensed practical nurses advocate for clients or their representatives especially when they are unable to advocate for themselves.

Competencies

A framework was developed to identify and organize the competencies. The framework includes 1) professional practice, 2) legal practice, 3) ethical practice, 4) foundations of practice and 5) collaborative practice. The order of the competencies is not an indication of priority or importance.

Professional Practice

Licensed practical nurses are members of a self-regulating profession and adhere to a Code of Ethics and Standards of Practice. 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. This includes an awareness of the need for continued professional development, self-assessments, feedback and self-directed learning activities for professional growth. Licensed practical nurses are expected to utilize knowledge, critical thinking, inquiry and research to build an evidence-informed practice.

Competent entry-level licensed practical nurses:

1. Are responsible and accountable for their own decisions and actions:
   a) recognize and practise autonomously within scope of practice;
   b) display initiative, beginning confidence and self-awareness, and recognize when to seek assistance and guidance;
   c) use critical thinking, inquiry and clinical judgment for decision-making;
   d) assess implications of various outcomes of decision making;
   e) demonstrate responsibility in completing assigned work and communicate about work completed and not completed; and
   f) engage in self-regulation.

2. Develop the therapeutic nurse-client relationship:
   a) initiate, maintain and terminate the therapeutic nurse-client relationship appropriately;
   b) provide client care in a non-judgmental manner, fostering an environment that encourages questioning and exchange of information; and
   c) respect clients’ directives, right to self-determination and right to informed decision-making.

3. Demonstrate leadership in all aspects of practice:
   a) assess and develop professional competence through a variety of professional activities;
b) maintain records of involvement in professional development which includes both formal and informal activities;
c) articulate and adhere to the licensed practical nurse’s scope of practice;
d) support and share knowledge with health-care students to meet their learning objectives in cooperation with clients, colleagues and other members of the health-care team;
e) understand and respect the roles and contributions of other health-care team members;
f) participate in evidence-informed practice;
g) advocate for clients, self, others and for the health-care system;
h) participate collaboratively in the analysis, development, implementation and evaluation of practice and policy that guide delivery of care;
i) integrate quality assurance/quality improvement principles and activities into nursing practice; and
j) promote a quality practice environment.

4. Demonstrate professional conduct:
   a) adhere to standards of practice for the profession;
   b) demonstrate and model professional behaviour;
   c) identify and respond to inappropriate behaviour and incidents of professional misconduct; and
   d) recognize, respond and appropriately report own and others’ near misses, errors and adverse events.

Ethical Practice

Licensed practical nurses use codes of ethics and an ethical framework when making professional judgments and practice decisions. They engage in critical thinking and inquiry to inform decision-making and use self-reflection to understand the impact of personal values, beliefs and assumptions in the provision of care. Licensed practical nurses establish therapeutic, caring and culturally-safe relationships with clients and health-care team members based on appropriate relationship boundaries and respect for the client’s right to self-determination.

Competent entry-level licensed practical nurses:

5. Apply the ethical framework of the therapeutic nurse-client relationship:
   a) recognize and fulfill the professional obligation of the duty to provide care;
   b) establish and maintain respect, empathy, trust and integrity in interactions with clients;
   c) establish and maintain appropriate professional boundaries with clients and other health-care team members;
   d) establish and maintain a safe and caring environment that supports clients to achieve optimal health outcomes;
   e) analyze the impact of personal values and assumptions on interactions with clients;
   f) recognize and respect the values, opinions, needs and beliefs of clients and others; and
   g) identify and resolve situations involving moral and ethical conflict, dilemma or distress.
6. Promote clients’ rights and responsibilities:
   a) ensure that consent is obtained in multiple contexts (e.g., consent for care, refusal of
treatment, release of health information and consent for participation in research);
   b) protect clients’ rights by maintaining confidentiality, privacy and dignity within and
across health care agencies and with other service sectors;
   c) facilitate and support clients’ capacity and right to self-determination;
   d) advocate for equitable access, treatment and allocation of resources for all clients; and
   e) use an ethical reasoning and decision-making framework to address situations of
ethical conflict, dilemma or distress.

Legal Practice

Licensed practical nurses adhere to applicable provincial/territorial and federal legislation and regulation,
professional standards and employer policies that direct practice. They demonstrate an understanding
of professional self-regulation by developing and enhancing their own competence, promoting safe
practice and maintaining their own 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 function.

Competent entry-level licensed practical nurses:

7. Adhere to legal requirements of practical nursing practice:
   a) practise according to relevant mandatory reporting legislation and other reporting
requirements under legislation, regulation, by-laws and policies applicable to licensed
practical nurses (e.g., abuse, abandonment, communicable diseases, and mental health
issues and concerns);
   b) exercise professional judgment when practising within own level of competence,
established professional standards, employer policies and procedures; and
   c) recognize, respond and appropriately report questionable orders, actions or decisions
made by other health-care workers.

8. Maintain client confidentiality in written, oral and electronic communication:
   a) disclose relevant information to appropriate individuals;
   b) recognize and respond to the clients’ right to health-care information; and
   c) be aware of personal health information and privacy legislation.

9. Adhere to legal requirements regarding documentation:
   a) document according to established professional standards, employment policies and
   procedures;
   b) maintain clear, concise, accurate, objective and timely documentation;
   c) initiate contact and receive, transcribe and verify orders; and
   d) complete occurrence reports as required.
Foundations of Practice

As integral members of the health-care team, licensed practical nurses employ a systematic approach, using the nursing process, to deliver safe, competent and ethical client-centred care. Licensed practical nurses use critical thinking, inquiry and evidence to inform clinical judgment and decision-making.

Competent entry-level licensed practical nurses:

10. Complete comprehensive health assessments of clients throughout the lifespan:
   a) perform physical, cognitive, spiritual, cultural, emotional, psychological, and social assessments;
   b) select and utilize appropriate technology;
   c) research and respond to relevant clinical data; and
   d) comprehend, respond to and appropriately report assessment findings.

11. Formulate clinical decisions that are consistent with client needs and priorities:
   a) reflect upon practice experiences and apply critical thinking and inquiry to guide decision-making; and
   b) determine nursing diagnoses.

12. Implement evidence-informed nursing interventions based on assessments findings, client preferences and desired outcomes.

13. Set priorities and develop time-management skills for meeting responsibilities:
   a) organize competing priorities into appropriate actions.

14. Facilitate the involvement of clients in their care plan:
   a) collaborate with clients to identify actual and potential health goals and outcomes; and
   b) collaborate with clients in the discharge planning process.

15. Facilitate health education:
   a) assess clients’ health literacy and health knowledge;
   b) assess, plan, implement and evaluate the teaching and learning process;
   c) provide information and access to resources; and
   d) evaluate teaching effectiveness in promoting self-care capacity and safety.

16. Contribute to a culture of safety:
   a) apply evidence-informed principles of client safety; and
   b) implement quality improvement and risk management strategies to maintain and promote a safe work environment.

17. Perform ongoing evaluation throughout delivery of care:
   a) evaluate the effectiveness of nursing interventions by comparing actual outcomes to expected outcomes; and
   b) review and revise the plan of care, and communicate accordingly.
Collaborative Practice

Licensed practical nurses work collaboratively with clients and other members of the health-care team, within their legislated scope of practice and individual competence. They recognize that collaborative practice is guided by shared values and accountability, a common purpose or care outcome, mutual respect and effective communication (Health Professions Regulatory Network, 2008). They demonstrate leadership by fostering continued self-growth to meet the challenges of the evolving health-care system.

Competent entry-level licensed practical nurses:

18. Initiate, maintain and terminate collaborative relationships with clients:
   a) initiate and maintain a therapeutic environment;
   b) promote safety, comfort and cultural sensitivity; and
   c) engage clients in identifying their health needs, strengths, capacities and goals.

19. Communicate collaboratively with the client and other members of the health-care team:
   a) gather and/or provide essential client information;
   b) utilize communication techniques to promote effective interpersonal interaction; and
   c) demonstrate and apply conflict management and resolution skills.

20. Demonstrate leadership within the health-care team:
   a) distinguish between the legislated scope of practice, employer policies and individual competence;
   b) build partnerships with health-care team members based on trust and respect for the unique and shared competencies of each member;
   c) collaborate with other members of the health-care team to plan, implement and evaluate care;
   d) integrate evidence-informed practice in collaboration with members of the health-care team;
   e) provide leadership, direction, assignment and supervision to unregulated health workers and others;
   f) participate in emergency preparedness planning and resources, and work collaboratively with others to develop and implement plans; and
   g) demonstrate initiative to constructively discuss concerns with other members of the health-care team to support effective teamwork and positive client outcomes.
Glossary

Below are the terms and definitions as they are used in this document.

**Abuse**
Abuse can be physical, sexual, emotional or verbal. It is intimidation or manipulation of another person. The purpose is to control another person. It is generally a long-term pattern of behaviour although specific short-term interactions can be labeled as abusive.

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

**Advocate**
To speak or act on behalf of self or others by respecting decisions and enhancing autonomy.

**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 scope of practice.

**Client**
Refers to individuals (or their designated representatives), families and groups.

**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.

**Clinical decisions**
Decisions derived from reasoning processes based on clinical judgment.

**Clinical judgment**
Processes that rely on critical inquiry to reflect the complex, intuitive and conscious thinking strategies that guide nursing decisions.

**Collaboration**
A partnership between a team of health providers and a client where the client retains control over his/her care and is provided access to the knowledge and skill of team members to arrive at a realistic team-shared plan of care and access to the resources to achieve the plan.

**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.

**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.
Competent
Having or demonstrating the necessary knowledge, skills and judgments required to practise safely and ethically in a designated role and setting.

Conflict resolution
The process of resolving a dispute or conflict by adequately addressing the interests of all parties.

Continuing Competence
The ongoing ability to integrate and apply the knowledge, skills and judgement required to practise safely and ethically in a designated role and setting.

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. (Brunt, 2005; Jurisdictional Collaborative Process, 2006)

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.

Culture of safety
A commitment to applying core safety knowledge, skills and attitudes to everyday work environments.

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.

Duty to provide care
The professional obligation to provide care to clients and maintain the therapeutic nurse-client relationship.

Equitable
Characterized by equity or fairness, just and right, fair and reasonable.

Electronic Communication
Electronic communication, in the context of this document, is defined as one- or two-way communication with another via email, text, video chat or instant message.
**Entry-level competency**
The education, knowledge, skill judgment and attitudes required of beginning practitioners to provide safe, competent, ethical nursing care in a variety of settings for clients of all age groups.

**Entry-level practitioner**
The licensed practical nurse at the point of registration/licensure, following graduation from an approved practical nursing program or equivalent.

**Evidence-informed practice**
The identification, evaluation and application of nursing experience and current research to guide practice decisions.

**Fitness to practise**
The qualities and capabilities of licensed practical nurses relevant to their capacity to practise. This includes, but is not limited to, freedom from any cognitive, physical, psychological or emotional conditions, or a dependence on alcohol or drugs that impairs their ability to practise nursing.

**Harm**
An occurrence that negatively affects a client’s health and/or quality of life, which may impact any dimension of health.

**Health**
A state of complete physical, mental, and social well-being and not merely the absence of disease or infirmity. It includes physical, mental, spiritual, emotional, psychological and social health.

**Health assessment**
A process by which the licensed practical nurse obtains data on the client that includes a complete history of the client’s health status as well as a comprehensive physical assessment. The licensed practical nurse is prepared to complete health assessments on neonates, children and adults.

**Health-care team**
Clients, families, health-care professionals, unregulated health workers, students, volunteers, educators, spiritual leaders and others who may be involved in providing care.

**Health literacy**
The ability to understand, comprehend and to act upon health information.

**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.

**Illness prevention**
The collection of practices that are designed to circumvent illness and/or disease.
Implied consent
An inferred agreement for care based on a client’s presence, actions and the context of the situation.

Informed consent
A legal condition whereby a person gives permission for interventions based upon a clear understanding of the facts, implications and future consequences of an action.

Leadership
The shared and independent responsibility to model the profession’s values, beliefs and attributes, promoting and advocating for innovation and best practices.

Legislated scope of practice
Determined through provincial legislation set in individual jurisdictions.

Nursing diagnosis
A nursing statement about the client’s actual or potential health concerns that can be managed through independent nursing interventions.

Professional misconduct
Behaviour outside the boundaries of what is considered acceptable or worthy of its membership by the governing body of a profession.

Professional regulatory authorities
Canadian provincial and territorial professional bodies responsible for the regulation of licensed practical nurses.

Quality improvement
An organizational philosophy that seeks to meet clients’ needs and expectations by using a structured process that selectively identifies and improves all aspects of service.

Research
Systematic inquiry that uses orderly scientific methods and/or the nursing process to answer questions or solve problems.

Responsibility
Ability to respond and answer for one’s conduct and obligations, to be trustworthy, reliable and dependable.

Risk management
The ability to utilize a system of identifying potential risks, recognizing implications and responding appropriately.

Safety
The reduction or mitigation of unsafe acts within the health-care team and health-care system.
**Scope of practice**
The parameters that outline the roles and responsibilities of the licensed practical nurse as defined by legislation and the regulatory authorities.

**Self-determination**
A system of care delivery that promotes independence for clients to participate in decision-making to improve the quality of care.

**Social media**
Social media, in the context of this document, is defined as 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, chat rooms, listservs, blogs, wikis, photo, video and audio file-sharing sites and virtual worlds.

**Standards of practice**
Minimum expected levels of practitioner behaviour, against which actual practitioner behaviour is measured.

**Therapeutic environment**
A setting where the therapeutic nurse-client relationship can be developed and maintained.

**Therapeutic nurse-client relationship**
A relationship based on trust, respect and intimacy with the client that requires the appropriate use of power.

**Unregulated health worker**
A health-care worker, who is not part of a regulated health profession, who provides care to clients under the guidance of a regulated health professional.

**Work environment**
Any setting where health care is delivered.
References

The following competency profiles were consulted during the development of this document.


