Entry-Level Competencies for Licensed Practical Nurses

2019
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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). 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.

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 misses, errors and adverse events.
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. Advocates 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.

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 assessments 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

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<thead>
<tr>
<th>Glossary Term</th>
<th>Definition</th>
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<tr>
<td>Adverse event</td>
<td>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.</td>
<td>Adapted from Canadian Patient Safety Institute (2015). Patient safety and incident management toolkit. Available at <a href="https://www.patientpsafetyinstitute.ca/en/toolsResources/PatientSafetyIncidentManagementToolkit/Pages/Glossary.aspx">https://www.patientpsafetyinstitute.ca/en/toolsResources/PatientSafetyIncidentManagementToolkit/Pages/Glossary.aspx</a></td>
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<tr>
<td>Competence</td>
<td>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.</td>
<td>Adapted from: College of Nurses of Ontario (2014, rev. 2018). Entry-to-practice competencies for registered nurses. Available at <a href="http://www.cno.org/globalassets/docs/reg/41037_entrytopractic_final.pdf">http://www.cno.org/globalassets/docs/reg/41037_entrytopractic_final.pdf</a></td>
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<td>Conflict resolution</td>
<td>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.</td>
<td>Adapted from: Canadian Interprofessional Health Collaborative (2010). A National Interprofessional Competency Framework. Available at <a href="https://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf">https://www.cihc.ca/files/CIHC_IPCompetencies_Feb1210.pdf</a></td>
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<td>Diverse/diversity</td>
<td>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.</td>
<td>Canadian Practical Nurse Registration Examination: Examination Blueprint (2017). Available at <a href="http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf">http://cpnre.ca/wp-content/uploads/2019/02/YAS-CPNRE-Blueprint-Eng.pdf</a></td>
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<td>Duty to report</td>
<td>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.</td>
<td>Adapted from British Columbia College of Nursing Professionals Practice Standards (2019) Duty to Report. Available at <a href="https://www.bccnp.ca/Standards/Documents/PS_DutytoReport.pdf">https://www.bccnp.ca/Standards/Documents/PS_DutytoReport.pdf</a></td>
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<td>Fitness to practice</td>
<td>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 impair their ability to practise nursing.</td>
<td>Canadian Nurses Association (2017). Code of ethics for registered nurses. Available at <a href="https://cna-aiic.ca/~/media/cna/page-content/pdf-en/code-of-ethics-2017-edition-secure-interactive.pdf?la=en">https://cna-aiic.ca/~/media/cna/page-content/pdf-en/code-of-ethics-2017-edition-secure-interactive.pdf?la=en</a></td>
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<td>Health assessment</td>
<td>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.</td>
<td>Adapted from: Perry, A., Potter, P., &amp; Ostendorf, W. (2018). Clinical nursing skills and techniques (9th ed.). St. Louis: Mosby</td>
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<td>Interprofessional collaboration</td>
<td>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.</td>
<td>Adapted from: Canadian Interprofessional Health Collaborative (2010). A National Interprofessional Competency Framework. Available at <a href="https://www.cihc.ca/files/CIHIC_IPCompetencies_Feb1210.pdf">https://www.cihc.ca/files/CIHIC_IPCompetencies_Feb1210.pdf</a></td>
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<td>Nursing diagnosis</td>
<td>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.</td>
<td>The International Nursing Knowledge Association (NANDA) (2013). Available at <a href="http://www.nanda.org/nanda-i-resources/glossary-of-terms/">http://www.nanda.org/nanda-i-resources/glossary-of-terms/</a> Note: Provincial regulatory legislation may provide a jurisdictional specific definition for this term.</td>
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<td>Professional boundaries</td>
<td>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.</td>
<td>Adapted from: College &amp; Association of Registered Nurses of Alberta (2011). Professional Boundaries for Registered Nurses. Available at <a href="https://www.nurses.ab.ca/docs/default-source/document-library/guidelines/rn_professional-boundaries.pdf?sfvrsn=cc43bb24_12">https://www.nurses.ab.ca/docs/default-source/document-library/guidelines/rn_professional-boundaries.pdf?sfvrsn=cc43bb24_12</a></td>
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<td>Regulatory bodies/authorities</td>
<td>Canadian provincial and territorial bodies responsible for the regulation of licensed practical nurses.</td>
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<td>Social media</td>
<td>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.</td>
<td>Adapted from: Bodell, S. &amp; 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. <a href="https://doi.org/10.4276/030802214X14018723138156">https://doi.org/10.4276/030802214X14018723138156</a></td>
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<td>Standards of practice/ practice standards</td>
<td>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.</td>
<td>Adapted from: College of Nurses of Ontario (2019). Standards and guidelines. Available at <a href="http://www.cno.org/en/learn-about-standards-guidelines/standards-and-guidelines/">http://www.cno.org/en/learn-about-standards-guidelines/standards-and-guidelines/</a> Note: Provincial regulatory legislation may provide a jurisdictional specific definition for this term.</td>
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