



COLLEGE OF
LICENSED PRACTICAL NURSES
OF ALBERTA

Policy

Client and Co-Worker Abuse

Approved: March 13, 2020



This document is linked to legislation:

[Health Professions Act](#)
[Licensed Practical Nurses Profession Regulation](#)
[Protection for Persons in Care Act](#)

This document is linked to other documents that direct expectations of professional behaviour or requirements for practice:

[Standards of Practice](#)
[Code of Ethics](#)
[Standards of Practice on Boundary Violations](#)
[Professional Responsibility and Accountability](#)

This document is linked to related supportive documents:

[Professional Boundaries](#)
[Addressing Co-worker Abuse in the Workplace](#)
[Professionalism on Social Media](#)
[Duty to Report](#)
[Collaborative Practice in Nursing](#)

REVISIONS and UPDATES

N/A

The legislative mandate of the College of Licensed Practical Nurses of Alberta (CLPNA) is to serve and protect the public by ensuring its members deliver safe, competent and ethical nursing care. A CLPNA Policy outlines requirements and expected behaviours that will be monitored and enforced.

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INTRODUCTION Nursing is considered a compassionate profession. The physical, psychological, and social elements of nursing care inherently create feelings of familiarity between nurses and clients. Compassion remains essential in nursing while maintaining professional boundaries – including preventing and responding to abuse. Abuse of clients is rare; however, any abuse is unacceptable. Both client and co-worker abuse in healthcare negatively impacts clients by causing physical and emotional suffering.¹

Licensed Practical Nurses (LPNs) have a professional responsibility to behave ethically while interacting with clients, their families, and co-workers. Further, LPNs have an ethical obligation to report abuse to employers, the CLPNA, and any other appropriate authorities as required by law when they experience or witness abuse in the workplace. For more information about reporting requirements please see the Interpretive Document on the *Duty to Report* or the *Protection for Persons in Care Act*.

Abusive behaviour towards co-workers is a noteworthy problem in the profession which may negatively impact the nurse's health and compromise client care.² Disruptive behaviour or abuse in the workplace increases stress, decreases concentration, and reduces communication which negatively impacts employee health and puts clients at risk.³

PURPOSE All LPNs are responsible and accountable for adhering to the *Health Professions Act (HPA)*, the *Licensed Practical Nurses Profession Regulation*, *Standards of Practice for Licensed Practical Nurses in Canada*, *Standards of Practice on Boundary Violations*, and the *Code of Ethics for Licensed Practice Nurses in Canada*. These documents establish the foundation of LPN professionalism in the provision of practical nursing services.

The purpose of this policy is to establish the CLPNA's expectations for non-abusive behaviour and to provide LPNs with clearly defined acceptable and unacceptable conduct. LPNs are responsible for professional behaviour both on *and* off-duty. LPNs are responsible for upholding the integrity of the

profession, maintaining public confidence in the profession, and adhering to all standards of practice.

POLICY The HPA, *Licensed Practical Nurses Profession Regulation*, *Standards of Practice for Licensed Practical Nurses in Canada*, *Standards of Practice on Boundary Violations*, and the *Code of Ethics for Licensed Practice Nurses in Canada* all lay out expectations for professional and ethical conduct for LPNs. Part of professional and ethical conduct includes not abusing clients or co-workers.

This policy separates client abuse and misconduct (Part A) from co-worker abuse and misconduct (Part B). However, abuse of clients and/or co-workers breaches all four standards of the *Standards of Practice for Licensed Practical Nurses in Canada* and all five principles from the *Code of Ethics for Licensed Practice Nurses in Canada*.

Any members found violating this policy will face consequences for their actions which may include education, suspension, or cancellation of their practice permit. In addition, section 80(2) of the HPA states, if a hearing tribunal has

reasonable and probable grounds to believe that the investigated person has committed a criminal offence, the hearing tribunal must direct the hearings director to send a copy of the written decision under section 83 to the Minister of Justice and Solicitor General.

This means that if abusive behaviour could reasonably be considered criminal the Hearing Tribunal would order the Hearings Director to refer the conduct to the Minister of Justice.



PART A

Client Abuse and Misconduct

The CLPNA does not tolerate abuse of clients as abuse contravenes the *Standards of Practice for Licensed Practical Nurses in Canada* and the *Code of Ethics for Licensed Practical Nurses in Canada* as detailed above.

Abuse is the exploitation of an existing power imbalance for personal gain. The nature of the nurse-client relationship means that LPNs inherently have power over clients in their care. Because of the power imbalance in the nurse-client relationship, LPNs have a professional responsibility to maintain professional boundaries between themselves and their clients. A professional boundary is the safe space between an LPN's position of power and a client's vulnerability.⁴ Maintaining appropriate boundaries between LPNs and clients builds trustworthy and respectful relationships.

Types of Client Abuse

- Sexual abuse refers to the threatened, attempted, or actual conduct of a sexual nature towards a client
- Physical abuse refers to using force that can cause physical pain or injury to a client
- Emotional abuse refers to the manipulation of a client's emotions for an intended purpose
- Financial abuse refers to activities that involve the monetary gain of a healthcare provider at the expense of the client
- Neglect refers to the failure to meet basic needs of a client deliberately, due to indifference, or a lack of knowledge or skills.

Sexual Abuse and Sexual Misconduct

Amendments to the HPA in 2019 standardized the sanctions of all regulated healthcare providers when they are found guilty of sexual abuse or sexual misconduct of their clients. LPNs can refer to the *Standards of Practice on Boundary Violations* and the *Practice Guideline: Professional Boundaries* for more detailed definitions, explanations, and expectations.

Findings of abuse or misconduct of a sexual nature are serious offences of unprofessional conduct. LPNs should always refer to the *Standards of Practice on Boundary Violations*.

Sexual abuse or sexual misconduct can occur face to face or via other media including but not limited to telephone, video chat, or social media. For more information regarding expectations for LPN behaviour on social media please see the *Social Media e-Professionalism* Guidance Document.

Physical Abuse

Changes in legislation focus on the consequences of sexually abusing clients. Nonetheless, the CLPNA prohibits all forms of abuse. Physical abuse encompasses behaviours that involve physical contact by an LPN toward a client that is violent, excessive, or inflicts physical harm. These actions include, but are not limited to:

- Hitting;
- Pushing;
- Slapping;
- Pinching;
- Shaking;
- Using excessive, unreasonable, or inappropriate force; and
- Handling a client in a rough manner.⁵

Contact is necessary in order to provide client care. Appropriate contact is not considered physical abuse.

Emotional Abuse

Emotional or verbal abuse of a client includes verbal or non-verbal communication toward or about a client that is disrespectful, emotionally manipulative, or causes psychological harm to the client. Emotional abuse may include:

- Sarcasm;
- Intimidation, including threatening gestures or actions;
- Manipulation;
- Retaliation or revenge;
- Teasing, laughing at, or taunting;



- Insensitivity to client's preferences;
- Swearing;
- Using a language with other co-workers that the client does not understand;
- Cultural or racial slurs; and
- Inappropriate tone of voice, such as one expressing impatience or demeaning others.⁶

Emotional abuse towards clients may occur face to face or over different media including but not limited to telephone, video chat, or social media.

Financial Abuse

LPNs should not, intentionally or otherwise, take financial advantage of a client, including:

- Borrowing money from clients;
- Soliciting gifts;
- Withholding finances through trickery or theft;
- Using influence, pressure or coercion to obtain the client's money or property;
- Taking control of banking information or credit cards;
- Having financial trusteeship, power of attorney or guardianship, or witnessing wills; and
- Assisting with the financial affairs of a client without the health team's knowledge⁷

Neglect

LPNs have a professional duty to care for clients. Abuse of clients also includes withholding of care, including withholding of:

- Clothing;
- Food;
- Fluids;
- Needed aids or equipment;
- Medication;
- Communication; and
- Non-therapeutic privileges.

Neglect can also include emotional abuse where an LPN ignores, confines, or isolates a client.⁸



PART B

Co-worker Abuse

Abuse towards co-workers violates the standards and expectations of the CLPNA. For the purposes of this policy, the term “co-worker abuse” will be used as an umbrella term to capture all terms and labels currently used to describe abusive behaviour between colleagues.

Co-worker abuse comprises anything that a reasonable person would consider as victimizing, humiliating, undermining, or threatening and does not include ordinary respectful conflict. Co-worker abuse could be sexual, physical, or emotional in nature. LPNs are expected to maintain professional conduct with co-workers both on *and* off-duty.

Like client abuse, co-worker abuse can arise from an exploitation of an existing power imbalance regardless of position hierarchy. LPNs who find themselves in positions of leadership should be aware of the power dynamics between themselves and their co-workers. As is the case with nurse-client relationships LPNs must avoid exploiting their co-workers for personal gain.

Types of Co-worker Abuse

- Sexual abuse refers to the threatened, attempted, or actual *non-consensual* conduct of a sexual nature towards a co-worker
- Physical abuse refers to using force that may cause physical pain or injury
- Emotional abuse refers to the manipulation of a co-worker’s emotions for an intended purpose

Co-worker abuse decreases the quality of healthcare provided to clients.⁹ Abuse of co-workers is not tolerated by the CLPNA as it contravenes the *Standards of Practice for Licensed Practical Nurses in Canada* and the *Code of Ethics for Licensed Practical Nurses in Canada* as detailed above.

Sexual Abuse and Misconduct

Sexual abuse of co-workers is non-consensual sexual conduct. Relationships between co-workers may begin consensually. Consent must be voluntary and can be revoked at any time for any reason.¹⁰ If a partner in the relationship revokes consent any further conduct becomes non-consensual and is considered sexual abuse.

The *Standards of Practice on Boundary Violations* outlines the expectation to maintain professional boundaries with colleagues and co-workers.¹¹

Sexual abuse or misconduct can occur face to face or via other media including but not limited to telephone, video chat, or social media.

Physical Abuse

Physical abuse includes threatening actions or violence towards a co-worker. For specific examples of physical abuse please see the physical abuse section for client abuse and misconduct as detailed above.

Emotional Abuse

LPNs are expected to respect co-workers, work collaboratively for the best interest of the client, and commit to the shared values of the healthcare team. Emotional abuse is the manipulation of a co-worker’s emotions for an intended purpose. For more detailed information please see the Practice Guideline *Addressing Co-Worker Abuse in the Workplace* and *Collaborative Practice in Nursing* documents.

Emotional abuse also encompasses bullying. Bullying involves deliberate acts of verbal aggression intended to intimidate, offend, degrade or humiliate a person or group of people.¹² It also includes purposeful exclusion or isolation of another with the intent to harm and erode the victim’s self-confidence and self-esteem.¹³

Emotional abuse of a co-worker can include but is not limited to the following habitual behaviours:



- **Nonverbal innuendo:** raising eyebrows; eye rolling; or turning one's back on another
- **Verbal affront:** snide remarks; ridicule; sarcasm; name-calling; fault-finding; condescending language; patronizing
- **Undermining activity:** refusing to work with a co-worker; ignoring a co-worker's request for help; belittling or criticizing the nurse in front of clients and others
- **Withholding information:** reluctance or refusal to answer questions regarding practice, policy, or client information; purposefully giving the wrong information
- **Sabotage:** deliberately setting up a negative situation to make another look bad/incompetent; assigning unreasonable duties or workload to create unnecessary pressure; establishing impossible deadlines that will set up the individual to fail;
- **Infighting:** bickering with colleagues; rivalry
- **Scapegoating:** unfairly attributing mistakes, problems, or errors to one person
- **Backstabbing:** complaining to others about an individual without speaking directly to the individual; spreading malicious rumours, gossip, or innuendo that is not true
- **Failure to respect privacy:** intruding on a person's privacy by pestering, spying or stalking; tampering with a person's belongings
- **Broken confidences:** repeating information that was told in confidence¹⁴

Emotional abuse also includes conduct that uses emotional manipulation for financial gain. Emotional abuse towards co-workers may occur face to face or over different media including but not limited to telephone, video chat, or social media.



CONCLUSION Abuse in the workplace can have direct impacts on client care regardless of the victim. The CLPNA does not tolerate abuse of any kind by its members. Any abuse is considered serious. Any members found violating this policy will face consequences for their actions which may include education, suspension, or cancellation of their practice permit.

This policy is a resource intended to clarify the CLPNA's expectations regarding appropriate conduct. This document is in place so that LPNs clearly

understand the expectations and consequences of their behaviours. LPNs are expected to apply this policy to their own practice and avoid abusing clients and co-workers.

If after reading this document you have questions about abuse in the workplace (directed at clients or co-workers), please contact the CLPNA's Complaints department via email at complaints@clpna.com, or by phone at 780-484-8886 or 1-800-661-5877 (toll free in Alberta).

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