



COLLEGE OF  
**LICENSED PRACTICAL NURSES**  
OF ALBERTA

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# Practice Guideline

## Confidentiality

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Approved: December 29, 2022



**This document is linked to legislation:**

[Health Information Act](#)  
[Health Information Regulation](#)  
[Personal Information Protection Act](#)

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

[Code of Ethics for Licensed Practical Nurses in Canada](#)  
[Documentation](#)  
[Professional Responsibility and Accountability](#)  
[Standards of Practice for Licensed Practical Nurses in Canada](#)  
[Standards of Practice on Boundary Violations](#)

**This document is linked to related supportive documents:**

[Duty to Report](#)  
[Privacy Legislation in Alberta](#)  
[Professional Boundaries](#)  
[Self-Employed Practice](#)  
[Social Media and e-Professionalism Guideline for Nurses](#)  
[Virtual Healthcare](#)

*The legislative mandate of the College of Licensed Practical Nurses of Alberta (CLPNA) is to serve and protect the public by ensuring its registrants deliver safe, competent, and ethical nursing care. A Practice Guideline is an evidence-informed document designed to assist registrants with making decisions about appropriate practice.*

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Approver        Executive

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

Licensed Practical Nurses (LPNs) have legal and ethical obligations to protect the privacy and confidentiality of patients' information.<sup>1</sup> The terms privacy and confidentiality are often used interchangeably; however, they mean slightly different things. Privacy applies to an individual person and their right to not share information about themselves with others and to make decisions about how their personal information is shared. Confidentiality applies to the information and refers to the ethical duty of healthcare professionals to safeguard the personal information about a person that they can access or that has been disclosed to them.

A healthcare professional's commitment to protecting a patient's right to privacy must be balanced against the need to disclose health information. This document is meant to help LPNs navigate these obligations.

**PURPOSE** The purpose of this practice guideline is to support LPNs in respecting patient privacy and maintaining the confidentiality of patient information in their practice.

**DISCUSSION OF EVIDENCE** Upholding patients' privacy and keeping their information confidential is a foundational part of being a healthcare professional and is essential to maintaining trust within a nurse-patient relationship. The *Standards of Practice for Licensed Practical Nurses in Canada* (Standards of Practice) and the *Code of Ethics for Licensed Practical Nurses in Canada* (Code of Ethics) outline key expectations related to privacy and confidentiality.<sup>2</sup>

### **Standards of Practice**

4.3 Advocate for the protection and promotion of clients' right to autonomy, confidentiality, dignity, privacy, respect, and access to care and personal health information.

### **Code of Ethics**

2.3 Respect and protect client privacy and hold in confidence information disclosed except in certain narrowly defined exceptions.

2.3.1 Safeguard health and personal information by collecting, storing, using, and disclosing it in compliance with relevant legislation and employer policies.

2.3.2 Report any situation where private or confidential information is accessed or disclosed without appropriate consent or legal authority, whether deliberately or through error.

2.3.3 Ensure that any discussion/communication (verbal, written, or electronic) is respectful and does not identify the client unless appropriate.

2.3.4 Maintain professional boundaries in the use of electronic media.

The *Entry-Level Competencies for Licensed Practical Nurses* and the *Competency Profile for Licensed Practical Nurses* outline additional expectations regarding privacy and confidentiality for LPNs.<sup>3</sup> It is the LPN's responsibility to be aware of and follow any employer privacy and confidentiality requirements.<sup>4</sup>

**INFORMED PRACTICE** This guideline outlines some key considerations that will help LPNs uphold privacy and confidentiality in their practice.

LPNs will need to work in collaboration with their employers to meet legislated requirements related to the collection, use, and disclosure of health and personal information. Employers who are custodians under the *Health Information Act* (HIA) are

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\* In this document, "registrant" has the same meaning as "regulated member" in the *Health Professions Act*.



responsible for establishing policy and procedures to enable implementation of requirements under the HIA. A complete list of health professions that are custodians can be found in section 2(2) of the *Health Information Regulation*.

### **Practice within Relevant Laws**

LPNs are responsible to be aware of the relevant laws respecting privacy and access to personal and health information that apply to their practice and to follow those requirements.<sup>5</sup> LPNs can refer to *Privacy Legislation in Alberta* for more information.

There are legal obligations to disclose or report otherwise confidential information to an appropriate authority in certain circumstances. LPNs can refer to *Duty to Report* for more information.

LPNs engaged in self-employed practice are responsible for developing consent procedures related to appropriate disclosure of health information to others. LPNs can refer to *Self-Employed Practice* for more information.

### **Respect and Protect Patient Privacy and Confidentiality**

Patient information obtained from a nurse-patient relationship is confidential and needs to remain confidential during and after patient assignment. Unintentional or unauthorized disclosure of patients' information to colleagues, healthcare providers, and family or friends of the patient may result in a finding of misconduct.

Patient information should only be shared between colleagues or other healthcare providers if they are involved in the provision of care for that patient. The information being shared must be necessary and related to the provision of care.

Confidential information should only be shared with the intended recipients. Be aware of who you are talking to and where the discussion is taking place. Be mindful of the physical or virtual space you are in and who may hear your private conversations. The

amount of information disclosed should also be appropriate to the recipients of the message.

It is not recommended that LPNs share patient information even if information has been anonymized (i.e., the patient's name has been removed). A small amount of patient-identifying information may be sufficient to uncover a patient's identity and health information.

### **Technology**

Use of technology (e.g., cellphones, laptops etc.) may result in unintentional or unauthorized disclosure if precautionary measures are not taken. Technology can make it easier for breaches in confidentiality to occur by using a telecommunication device or social media.

Even if the patient may be requesting the information, there are security risks when using technology to share information. LPNs must be aware of and comply with any employer requirements related to technology use. When sharing necessary patient personal health information over technology with colleagues and/or other healthcare providers, LPNs should be aware of the risks and take appropriate precautions by following any employer requirements.

Strategies related to the appropriate use of technology can be found in *Virtual Healthcare and Social Media and e-Professionalism*.

### **Personal Notes**

All written confidential information including personal assessment notes or patient assignment sheets should properly be disposed of in a confidential waste receptacle. For LPNs that keep journals, it is important to keep the focus on self-reflection and avoid writing down any information that could be patient-identifying.

### **Accessing Information**

Accessing the information or records of family members, friends, or unassigned patients is a breach



of privacy. The access of information should be in accordance with job responsibilities.

Unauthorized access of information can be investigated by the Office of the Information and Privacy Commissioner of Alberta (OIPC). The OIPC has authority to investigate the unauthorized access of information which may lead to prosecution and a monetary penalty.

### **Disclosing Information**

Generally, confidential information can only be shared with people outside a patient's healthcare team (this includes family and friends) after the patient gives their consent. The consent to disclose information should be documented in writing or electronically. This consent should state, at minimum, the purpose for which the information may be disclosed and to whom it may be disclosed.

Generally, a minor cannot give their own consent and the consent of their parent or guardian is required. However, under the mature minor doctrine, a minor may be able to give their own consent. A mature minor is a minor who has a certain level of intelligence, understanding and awareness. The most responsible healthcare provider will assess if a minor is considered a mature minor. Age alone will not determine if a minor is a mature minor, but a mature minor will typically be 15 years old or older. A mature minor will have to give their consent before their information can be shared with people outside the healthcare team, including their parent or guardian.

However, there are exceptions where consent may not be required to disclose patient information:

- to another healthcare professional;
- to a person who is responsible for providing continuing treatment and care to the patient;
- to family or close friends if the information is given in general terms and concerns the patient on the day on which the information is disclosed;

- to family or close friends if the patient is deceased and the information relates to the circumstances surrounding their death;
- to any person if the disclosure can, on reasonable grounds, be believed to minimize a risk of harm to health or safety of a minor or an imminent danger to the health or safety of any person;
- if the patient lacks the mental capacity to provide consent and the LPN believes that disclosure is in the patient's best interests; or
- if the disclosure is authorized or required by law.

In urgent or emergency situations (and in accordance with employer requirements), consent may be waived or collected from the patient after the information is disclosed.

### **Disclosure of Information Postmortem**

Patient information is confidential during and after care. LPNs are still obligated to maintain confidentiality of information after a patient's death. A deceased patient's personal health information should only be disclosed to others when there is a legal responsibility to do so and, in some cases, proof of the legal responsibility that justifies the disclosure.

**CONCLUSION** Upholding patient privacy and maintaining confidentiality is integral to LPN practice. It is part of a LPN's professional, legal, and ethical responsibility. A breach in privacy and confidentiality may be considered unprofessional conduct and may lead to legal and/or disciplinary action.

This document outlines the expectations and guidance for LPNs related to maintaining confidentiality in their practice.

If you have any questions, please contact the Professional Practice Team using [Ask CLPNA](#), or by phone at 780-484- 8886 or 1-800-661-5877 (toll free in Alberta).



## REFERENCES

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- <sup>1</sup> *Health Information Act*, RSA 2000, c H-5.; *Personal Information Protection Act*, SA 2003, c P-6.5; Canadian Council for Practical Nurse Regulators (CCPNR), *Standards of Practice for Licensed Practical Nurses in Canada* (2020), [https://www.clpna.com/wp-content/uploads/2022/06/doc\\_CCPNR\\_2020\\_Standards\\_of\\_Practice-ID-15906.pdf](https://www.clpna.com/wp-content/uploads/2022/06/doc_CCPNR_2020_Standards_of_Practice-ID-15906.pdf), *Code of Ethics for Licensed Practical Nurses in Canada* (2013), [https://www.clpna.com/wp-content/uploads/2013/02/doc\\_CCPNR\\_CLPNA\\_Code\\_of\\_Ethics.pdf](https://www.clpna.com/wp-content/uploads/2013/02/doc_CCPNR_CLPNA_Code_of_Ethics.pdf), College of Licensed Practical Nurses of Alberta (CLPNA), *Professional Responsibility and Accountability* (2022), [https://www.clpna.com/wp-content/uploads/2018/01/doc\\_Policy\\_Professional\\_Responsibility\\_Accountability.pdf](https://www.clpna.com/wp-content/uploads/2018/01/doc_Policy_Professional_Responsibility_Accountability.pdf).
- <sup>2</sup> *Standards of Practice*, 8; *Code of Ethics*, 5.
- <sup>3</sup> CLPNA, *Competency Profile for Licensed Practical Nurses* (2020), C-4-3, C-5-5, C-6-2, C-12-3, C-14-5, D-2-3, E-6-3, W-2-4, W-1-2, [https://www.clpna.com/wp-content/uploads/2020/01/doc\\_Competency\\_Profile\\_for\\_LPNs\\_5th\\_Ed\\_2020.pdf](https://www.clpna.com/wp-content/uploads/2020/01/doc_Competency_Profile_for_LPNs_5th_Ed_2020.pdf), CCPNR, *Entry-to-Practice Competencies for Licensed Practical Nurses* (2013), 8, [https://www.clpna.com/wp-content/uploads/2013/02/doc\\_CCPNR\\_CLPNA\\_Entry\\_to\\_Practice.pdf](https://www.clpna.com/wp-content/uploads/2013/02/doc_CCPNR_CLPNA_Entry_to_Practice.pdf).
- <sup>4</sup> Alberta Health Services, *Guidelines for Disclosure of Health Information* (2021), <https://www.albertahealthservices.ca/assets/info/lp/if-lp-ip-guidelines-for-disclosure-of-health-information.pdf>.
- <sup>5</sup> CCPNR, *Entry-Level Competencies for Licensed Practical Nurses* (2019), 6, [https://www.clpna.com/wp-content/uploads/2019/08/doc\\_CCPNR\\_Entry-Level\\_Competerencies\\_LPNs\\_2019E.pdf](https://www.clpna.com/wp-content/uploads/2019/08/doc_CCPNR_Entry-Level_Competerencies_LPNs_2019E.pdf)