



Practice directions assist licensed practical nurses (LPNs) to understand their responsibilities and legal obligations, enabling them to make safe and ethical decisions within their practice. LPNs are expected to comply with the information disseminated in practice directions. Failure to do so may result in investigation for misconduct and/or an audit of the nurse's practice.

Purpose

The purpose of this practice direction is to provide LPNs with information regarding the College of Licensed Practical Nurses of Manitoba's (CLPNM's) continuing competence program (CCP), and their related obligations as members of Manitoba's practical nursing profession.

About the CCP

Section 15 of *The Licensed Practical Nurses Act* (the LPN Act) requires that the CLPNM establish a continuing competence program which provides for supervision of the practice of licensed practical nursing, and which includes but is not limited to: reviewing the professional competence of members, conducting practice audits in accordance with the LPN Act, and requiring members to participate in programs for continuing competence.

The CCP assists Manitoba's LPNs to retain and continuously build upon their knowledge, judgment and skill. By participating in the program, LPNs identify and mitigate risk in their practice and remain up-to-date on evolving evidence in their field, which in turn, contributes to high-quality, safe care for Manitobans.

The CLPNM's program for continuing competence requires that each LPN:

- maintain a professional portfolio
- apply their knowledge, judgment and skill through active practice (at least 1000 hours in each four-year period)
- complete self-assessments of their professional competence, at least once a year and as necessary
- complete a mandatory CLPNM Annual Professional Learning (APL) module each year (a different APL topic will be selected by the CLPNM each year)
- complete at least one Quality Improvement (QI) Learning Plan each year
- complete one Quality Assurance (QA) Learning Plan, if selected for the QA Category of the CCP Audit
- evaluate their CCP learning experiences and the impact of the learning on their practice at least annually, and
- participate, as directed, in the CLPNM's processes to audit its registrants' continuing competence and learning activities.

All LPNs must participate in these activities each year that they remain on the active practising register, regardless of employment status.

Annual Self-Assessment

Each year, all LPNs must complete a self-assessment as one component of the CCP. The CLPNM's CCP Annual Self-Assessment Tool (available on the CLPNM website) assists LPNs to self-assess against the Nursing Competencies, the Standards of Practice and Conduct, and the Code of Ethics for Manitoba LPNs. This is an opportunity for LPNs to reflect on their nursing practice, their competence, and their knowledge of their standards and code of ethics in order to identify opportunities for further learning and development as professionals. By engaging in self-assessment and reflection, LPNs can identify areas of their practice that require an increase in knowledge, judgment, or skill, areas of interest where their practice may expand, and/or the areas in which further education is needed to enhance competence.

An LPN who works in a self-employed capacity has an additional expectation to annually assess the risks associated with their practice. Read more about this expectation under the header Self-Employed LPNs, below.

Note that while submitting self-assessments and risk assessment forms is not normally required for the CCP Audit, the LPN is required to submit these documented self-assessments if the CLPNM asks to review them. Please see the CCP Instruction Guide (available on the CLPNM website) for more information about this component of the CCP.

Quality Improvement Learning Plans

After completing their annual self-assessment, each LPN will select one learning goal that advances their professional competence and is relevant to their current or future area of practice. The LPN will then identify and complete learning activities to help them address their goal, build their competence and improve the quality of their care over the span of their careers. This learning plan, which is

required of all LPNs each year, is referred to as the Quality Improvement (QI) Learning Plan.

Quality Assurance Learning Plans

When selected for the Quality Assurance (QA) category of the CCP Audit, the CLPNM will require some LPNs to complete a second learning plan. The second learning plan will be informed by practice feedback. Feedback from an employer or colleague will help the selected LPNs to reflect on and identify risks in their nursing practice. These risks should be addressed and/or mitigated through learning that will build upon or increase the LPN's competence in their area of practice. More information about the QA Audit can be found on pages 3 and 4 below.

Annual Professional Learning (APL) Modules

As part of the CCP, all LPNs will complete a mandatory APL module (approx. 60-90 minutes) each year on a topic related to the legislation, practice, and standards of their profession. The topic will be determined by the CLPNM and will vary from year to year. All LPNs will complete the same learning module each year. It may be completed by LPNs at a time that is convenient for them, as long as it is completed prior to the next registration renewal deadline in the fall. LPNs who do not complete the APL module each year by the registration renewal deadline will not be authorized to practice after that date.

Professional Portfolio

LPNs will create, maintain, and continuously update a portfolio of professional education materials gathered while achieving their learning goals. The professional portfolio is an organized collection of documents that chronicle the LPN's nursing career and efforts to assess, maintain and build their professional competence. A professional portfolio may be made up of electronic documents, hard copy documents, or both, so long as it is organized

and clearly reflects an LPN's learning activities. This portfolio serves as evidence of past learning, a compilation of current study materials, and as a reference for refreshing knowledge in future. LPNs are required to submit their portfolios should the CLPNM ask to review them. The portfolio may also be requested by auditors during the CCP Audit. Please see the CCP Instruction Guide (found on the CLPNM website) for more information about this component of the CCP, including examples of documents to keep in a professional portfolio.

CCP and Registration Renewal

Each year, LPNs must renew their registration with the CLPNM by the renewal deadline to remain authorized to practise. Participation in the CCP is one of the requirements for registration renewal.

The CLPNM confirms CCP participation during the registration renewal window in a few ways.

- All LPNs must complete a declaration confirming their participation in the CCP as part of their renewal application. This declaration may be verified by the CLPNM at any time.
- The CLPNM will confirm that all LPNs have completed the Annual Professional Learning module before their registration renewal applications are approved. This is confirmed by checking that the LPN has completed the associated quiz.

The CLPNM will select at least 12% of Manitoba's LPNs each year for a detailed review of their continuing competence and learning activities. This is referred to as the CCP Audit. LPNs selected for the Audit are required to submit to the CLPNM evidence of their continuing competence and learning activities by the registration renewal deadline. Registrants selected for the CCP

Audit will have varying requirements, depending on the nature of the LPN's practice and the category of the CCP Audit they are selected for.

CCP Audit Categories

LPNs who are selected for the CCP Audit will be chosen for one of two categories:

➤ The Quality Improvement Audit (Category 1)

Each year, a minimum of 10% of Manitoba's LPNs will be selected for mandatory participation in the QI Category of the CCP Audit. This is referred to as the QI Audit for short. The purpose of the QI Audit is to confirm that LPNs are building their competence and improving the quality of their care over the course of their careers.

LPNs selected for the QI Audit will be required to submit their completed QI Learning Plan for review. These learning plans will be assessed by other active practising LPNs to identify whether each LPN's professional development activities are contributing to their competence, relevant to their practice, and in keeping with other requirements of the program.

The QI Audit takes place from January to March each year. During the QI Audit period, LPNs will have at least one opportunity to revise their QI Learning Plan if, following an initial review, the plan is found to not meet the requirements of the program.

➤ The Quality Assurance Audit (Category 2)

Each year, a smaller number (approximately 1%-2%) of LPNs will be selected for mandatory participation in the QA Category of the CCP Audit. This is referred to as the QA Audit for short. The purpose of the QA Audit is to obtain assurance that LPNs are demonstrating the competence necessary to practise safely in their current practice

environment, particularly when the LPN practises in a context that is associated with higher risk. The selection process for this category of the audit will be weighted towards LPNs who practise in circumstances associated with higher potential risk to clients. Some LPNs will be randomly selected. The QA Audit will span three years. This does not mean that the LPNs selected for this category of the audit will need to actively work on their learning activities continuously over a full three-year period. The audit timeframes have been spaced out to provide LPNs adequate time for meaningful practice feedback, reflection, and learning activities. This timeframe also provides LPNs the opportunity to participate in courses or workshops that might only be offered once a year.

QA Audit - Year 1

In the first year, LPNs selected for mandatory participation in the QA Audit are required to:

- submit their completed QI Learning Plan and participate in the QI Audit (see above),
- obtain feedback on their practice from an employer (self-employed LPNs who do not have another regulated health professional who can provide feedback on their practice may submit a completed Self-Employed Practice Reflection on Risk Form (RRF) as an alternative), and
- identify an additional learning goal, which is informed by the employer's practice feedback (or their own risk-assessment, in the case of self-employed LPNs). This second learning plan must be focused on risk mitigation in the LPN's practice.

The LPN must submit the goal and planned learning interventions (chosen based on practice feedback or risk assessment) for

the CLPNM's review prior to the registration renewal deadline in year one. The CLPNM will review the information submitted and notify the LPN if changes are required or if the CLPNM has any specific instructions for the LPN before they carry out their planned learning activities in year two.

QA Audit - Year 2

In the second year, LPNs who were selected for mandatory participation in the QA Audit in year one, are now required to:

- engage in learning activities to achieve the QA goal they identified the previous year, and
- submit to the CLPNM their completed QA Learning Plan, which includes a list of the completed learning activities, an evaluation of the impact of learning on their nursing practice, and an assessment of how risk in their practice was mitigated as a result of this learning.

QA Audit - Year 3

In the third year, completed QA learning plans will be reviewed during the annual CCP Audit.

Self-Employed LPNs

Any registrant, selected for either the QI or QA category of the CCP Audit, who is self-employed, must also submit examples of nursing care plan templates they use in their practice and excerpts of their policy manuals for review during audit. During the Audit, the policy manual excerpts will be reviewed for evidence that the registrant has kept their policies up to date and consistent with current best practice.

Additionally, risk assessment, risk management and risk mitigation are significant aspects of building and operating a self-employed practice. The CLPNM's Self-Employed Practice Reflection

on Risk Form (RRF) is a tool that has been developed to support the required risk analysis process. All Manitoba LPNs practising in a self-employed capacity must complete this tool and update it at least annually. The completed form must be saved by the LPN as part of their professional portfolio and may be requested by the CLPNM at any time, including during the CCP Audit. The completed tool may also be submitted by a self-employed LPN selected for the QA Audit, as an alternative to submitting a Practice Feedback Form from an employer or colleague.

The Self-Employed Practice Reflection on Risk Form is available [on the CLPNM website](#).

Verification of Practice Hours

A portion of those selected for the either the QI or QA category of the CCP Audit will also be selected to provide verification of practice hours. This verification must be supplied to the CLPNM directly by the employer. Specific instructions will be provided at the time the LPN is selected to provide verification.

Practice Audits

The CLPNM may randomly or specifically select some LPNs to undergo a more in-depth audit of their practice. This may involve chart reviews, direct observation of the LPN in practice, inspection of the practice environment, and/or reviews of additional information about the LPN's practice from other sources. Practice audits might be prompted by practice concerns raised through other CCP Audit categories, might be initiated at random, or might be directed by the CLPNM in cases where a registrant is practising in such isolation that they are unable to obtain feedback on their practice for the QA Category above.

LPN Responsibilities During an Audit

LPNs selected for any category or type of CCP Audit are required to:

- remain in communication with the CLPNM which includes:
 - ensuring their employers' contact information and personal contact information (including email address), is up to date in their CLPNM online profile, and
 - regularly checking email, voicemail and mail, and
- provide any information or documentation related to their practice and their CCP activities that the CLPNM direct them to provide, within the deadlines given.

When a Registrant Does Not Meet CCP Requirements

The CLPNM has an obligation, as a professional regulator, to monitor its registrants' continuing competence. Therefore, in a case where an LPN does not:

- engage in assessment of their practice and learning as required by the program
- complete the required learning activities
- keep or submit the required evidence of their learning activities
- demonstrate satisfactory learning and/or competence when audited
- meet deadlines and participate in processes to confirm their competence and CCP participation, and/or
- meet any other requirement of the CCP

the CLPNM will review the matter and make further decisions.

Potential decisions include:

- directing a registrant to further revise and resubmit a learning plan for an additional review
- directing a registrant to meet with a CLPNM Practice Consultant for a focused review of their professional responsibilities related to continuing competence
- adding a registrant to the selection pool for the CCP Audit the following registration

- year, or in a subsequent registration year, in either the QI or QA category
- directing a more in-depth audit of the registrant's practice (e.g., chart review, inspection and/or observation)
 - directing the member to successfully complete any examinations, tests, assessments, training or education that the registrar considers necessary to establish that the LPN is competent to engage in the practice of practical nursing
 - referring the matter to the CLPNM Investigation Committee as a potential breach of professional standards
 - referring the matter to the CLPNM Board of Directors for a decision under section 14 of the LPN Act (or a similar provision in successor legislation), and/or
 - any other decision authorized by governing legislation.

Conclusion

As members of a self-regulating profession, LPNs must be well-aware of their ongoing obligation to meet all active practising registration requirements, which includes meeting the profession's CCP requirements.

By understanding their CCP requirements and participating in the CCP, LPNs can help to protect and even strengthen the public's trust in the profession, while ensuring that Manitobans receive safe, competent and ethical care.

References

The following resources were consulted in the development of this document.

CLPNM (2021). *Standards of Practice and Conduct*

CLPNM (2014). *Code of Ethics*

CLPNM (2022). *CCP Instruction Guide*

Government of Manitoba (2001). *The Licensed Practical Nurses Act*

Government of Manitoba (2002). *The Licensed Practical Nurses Regulation*

For More Information

Additional information and resources on the CCP and the CCP Audit are available on the CLPNM website at

<https://www.clpnm.ca/for-registrants/continuing-competence/continuing-competence-program/>

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About the CLPNM

The CLPNM is the governing body for the licensed practical nursing profession in Manitoba. Mandated to govern its members in a manner that serves and protects the public interest, the CLPNM establishes practice requirements for the provision of safe and effective nursing care.