

# **Continuing Competency Program**

March 2024

## Continuing Competency Program

One of the mandates of the College is to develop, establish and maintain a continuing competency program to maintain the competence of the members and enhance the practice of the profession. *The Regulated Health Professions Act* (the "Act") identifies what the continuing competency program is to provide, and the *College of Registered Psychiatric Nurses of Manitoba General Regulation* (the "General Regulation") sets out the College's specific requirements.

Pursuant to ss 2.17 of the *General Regulation* the CRPNM's Continuing Competency Program (CCP) consists of:

- 1) The completion of a jurisprudence learning module that includes an evaluation component.
- 2) The undertaking of a self-assessment process.
- 3) The preparation and implementation of a self-development plan (the "learning plan").

The regulation also requires that a member keep records (the "professional portfolio") for the current year and each of the immediately preceding practice years.

## Introduction

Professional self-regulation is a privilege. The government of Manitoba has given the College the authority to regulate the Registered Psychiatric Nurse (RPN) profession in Manitoba through the provisions of *The Regulated Health Professions Act* (the "Act") and the CRPNM's *General Regulation*. The College must carry out its activities and govern its members in a manner that serves and protects the public interest.

In addition to its mandate to develop, establish and maintain a continuing competency program, the College is mandated to develop, establish, and maintain standards of practice and to monitor compliance and enforce those standards.

The [\*Standards of Psychiatric Nursing Practice\*](#) (the "Standards") set out the minimum acceptable level of performance required of a Registered Psychiatric Nurse. These standards articulate the legal and professional obligations of all RPNs.

The Standards apply to all practice settings, domains, and roles, regardless of an individual RPN's educational preparation or professional experience. It is the professional responsibility of each Registered Psychiatric Nurse to know, understand and adhere to these standards.

Self-regulation also involves individual professional responsibility. It means that RPNs know and understand the Standards, self-monitor and reflect both in and on their practice.

The Continuing Competency Program promotes safe and competent care for the public by requiring RPNs to continually assess their learning needs, find ways to meet these needs and put them into practice.

## Self-Assessment Resources

✓ **What is this all about?**

The self-assessment process is one of the requirements of the Continuing Competency Program. You will engage in a formal self-assessment process every year.

Self-assessment tools have been designed to assist Registered Psychiatric Nurses to meet the self-assessment requirement. These tools are based on the Standards and the CRPNM's General Regulation (Appendix A, B, C and D).

Starting in 2024, all RPNs will be required to complete a self-assessment utilizing the Standards that require that they address personal factors that might impact their professional practice. The College has posted [three self-assessment tools](#) to assist you in meeting this new requirement in 2024 and going forward.

The self-assessment resources are designed to promote reflection on your current practice. Self-assessment is an integral part of identifying your annual learning objectives and your personal/professional development needs.

The self-assessment tools/worksheets are for your personal use. Retain these worksheets for your records. You will not be asked to provide these to the College<sup>1</sup>.

✓ **Do I have to use the self-assessment tools provided?**

No. You may use other tools but be sure that the self-assessment process you use is grounded in the Standards and the requirements of the General Regulation.

✓ **I have completed the assessments, now what?**

As you reflect on your practice and your self-assessment consider the following:

- **Knowledge or theory?** Do you feel that you have adequate knowledge or theory to explain in a specific area of your practice?
- **Skill development?** Consider the therapeutic or psychomotor skills you need. Do you have the skills you need in your practice area? Are they adequate?
- **Need for learning:** Given your level of knowledge and skills, how important is it for you to take action to improve a specific area of your practice? While reviewing the self-assessment is there an area that would benefit from additional learning?

Once you have identified a priority for your learning plan, you can then start to complete the learning plan. A learning plan template is provided (appendix D).

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<sup>1</sup> The tools you use for self-assessment are confidential and for your use only. You may be asked to provide other continuing competency documents (your learning plan for e.g.) to the College as part of the audit process. The CRPNM will not use these documents for any other purpose other than ensuring you are meeting the requirements of the continuing competency program.

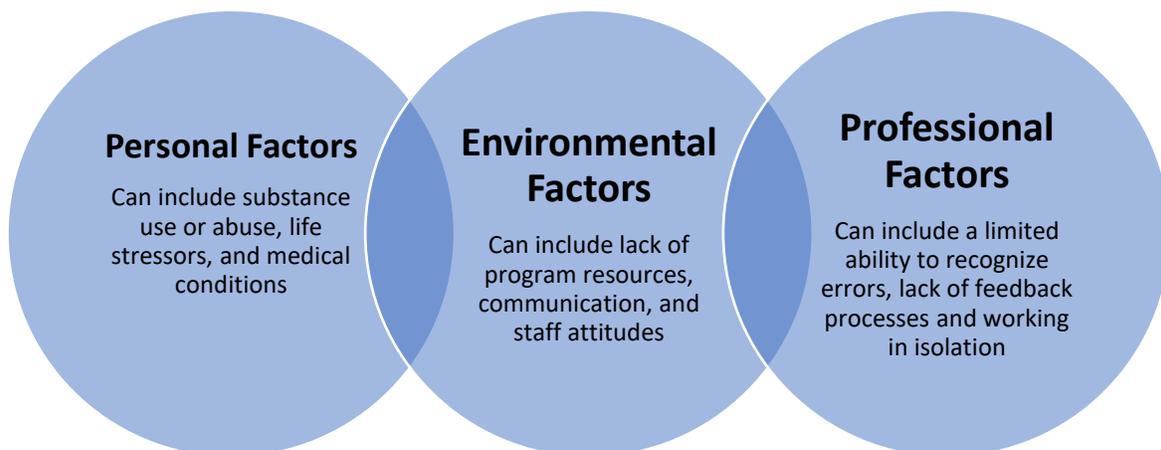
## \*NEW\* Personal Factors & Mitigating Risk

### ✓ **What is this all about?**

Starting in 2024, all RPNs will be required to complete a self-assessment against the Standards that require that they address any personal factors that might impact their professional practice.

The [CRPNM Code of Ethics](#) (the "Code") articulates the ethical principles and values that guide all RPNs in their professional practice. The Code sets out a framework for professional responsibility and accountability and a mechanism for self reflection and evaluation. An awareness of physical and mental health, and wellbeing is needed to assess one's ability to provide safe, competent, and ethical care.

Personal, professional, and environmental factors can impact the quality of psychiatric nursing practice and the maintenance and enhancement of competencies over time. Self-reflection and insight into the factors that might be impacting your professional practice promotes risk identification and risk management and ensures you are meeting your legal, ethical, and professional responsibilities to monitor your own fitness to practice.



You will continue to engage in the process of self-assessment utilizing the Standards to develop and implement your annual learning plan. The change to the program in 2024 means that you must also now include an assessment of personal factors that may influence and/or impact your professional practice. Although completing a self-assessment of these factors is a requirement, the tool you use is optional.

- ✓ The College has posted three self screening tools for your use. They can be accessed [here](#). These tools are for your personal use. Retain the results for your records. You will not be asked to provide these to the College.
- ✓ You will declare that you completed this assessment and create your personal risk management plan when you are audited starting in April 2024.

✓ **Protective Factors**

Identifying risk management and mitigation strategies is critical to minimizing the impact of the factors that can impact the quality of your psychiatric nursing practice and the enhancement of your competencies.

Below is a list of some mitigating/protective factors:

- Self-awareness: engaging in honest self-reflection and assessment of overall health (mental and physical).
  - Increasing protective factors including activities to treat and maintain personal health (exercise, yoga, meditation, regular medical follow-up as needed, self-care).
  - Engaging in meaningful activities and hobbies.
  - Tending to and engaging in close personal relationships.
  - Engaging in personal reflection regarding work stressors, systemic and program difficulties and identifying realistic ways to cope with these stressors (therapy, personal support network, cognitive behavioral skills to decrease the personal impact).
  - Vacation time and engaging in work life balance strategies.
  - Monitoring and awareness regarding occupational risk including burnout, vicarious trauma, and compassion fatigue.
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- ✓ Just as using a learning plan for your annual learning objectives is useful, a personal plan to mitigate the factors that are a risk to your professional practice can guide your ability to measure and implement change.
  - ✓ The College has designed a table for you to document your risk factors and establish a plan for risk management and mitigation. (see Appendix E- Personal Factors- Risk Management Plan).

# The Learning Plan

✓ **Make a plan!**

A blank learning plan is provided for you to meet this part of the continuing competence requirements (see Appendix F).

Once you identify competency areas that are a high priority, enter your learning objective right onto the learning plan. A [sample learning plan](#) is available to give you some ideas on how to write your learning plan.

✓ **How do I set objectives?**

Review your self-assessment and identify priority areas. For those areas, ask yourself what it is you need. Is it knowledge, skills, or both?

How will you meet the learning objective? Could you read a book, take a course, ask for instruction from a colleague, and/or search the internet for information? These ideas for action (continuing competency activities) become part of your learning plan. Be sure that these activities are aimed at meeting your learning objectives. This will be assessed when you are audited.

State your learning objective right onto the learning plan. The learning objective should be measurable.

✓ **How many objectives and continuing competence activities will I have to plan and do in a year?**

The Continuing Competency Program does not mandate a certain number of activities nor does the program assign a value (like a credit system) to one activity over another.

As an RPN, you must engage in the self-assessment process and in the development, implementation, and evaluation of a learning plan. The implementation of a learning plan (like the nursing process) implies an action or a group of actions or activities and an evaluation component. The number and type of activities will depend on your learning objective(s).

It is expected that every RPN will work on at least two learning objectives each year.

✓ **How do I decide?**

Your self-assessment will provide you with a picture of your strengths and the areas you need to develop. What you plan to work on in the next year will be an individual choice. Examine your learning objectives and establish priorities based on what you need to enhance your

practice.

✓ **What if I didn't meet my learning objective?**

The implementation of a learning plan (like the nursing process) implies an action or a group of actions or activities and an evaluation component. The number and type of activities will depend on your learning objective(s).

You may discover that your plans and the opportunities that were available were not sufficient in assisting you to meet your learning objective.

In the sample learning plan, it illustrates a learning objective that was not met.

In this example, the RPN revised the learning objective to reflect more accurately what they felt was needed. The RPN determined that the outstanding piece of the learning objective had to do with the skills required in dealing with boundaries. They revisited the plan to identify opportunities that would allow the practice of a particular skill. The learning objective was achieved, and the activity resulted in an increased level of competence and confidence.

## Your Portfolio

The continuing competency program requires that you keep records (the "professional portfolio") for the current year and each of the immediately preceding practice years.

- ✓ A portfolio is something, usually portable, that contains documents. For our purposes, these documents are evidence or representations of how you are maintaining your competence as a RPN in your area of practice. In some ways, a portfolio is like an expanded resume or CV. In fact, your portfolio should include your resume.
- ✓ The portfolio itself can take many forms. It can be a binder, a folder, or a USB storage device. How you store your evidence and papers is less important than what you place on/in your portfolio. The important point is to have a consistent storage system to help you organize relevant materials.
- ✓ **You will not send your portfolio or its contents to the CRPNM unless you are asked to do so.** You sign, by declaration, on your renewal application that you have met the continuing competency program requirements. Keeping a portfolio is part of the program requirements.

### What kinds of things do I keep in my portfolio?

The contents of the portfolio will likely differ from one RPN to another. In general, any evidence that relates to the attainment of the learning objectives should be kept in your portfolio.

The following is an example of the types of documentation you might keep. This list is not all-inclusive.

- ✓ your completed annual self-assessment
- ✓ your learning plan
- ✓ performance evaluations
- ✓ letters of commendation
- ✓ brochures from conferences or workshops attended
- ✓ samples of documents that you developed (policies, course outlines, redacted service plans)
- ✓ certificates of attendance from conferences or workshops
- ✓ transcripts from courses taken
- ✓ certificates
- ✓ resume or CV
- ✓ any notes about books or articles read
- ✓ dates of re-certifications or in-services attended
- ✓ documents provided during your audit (additional self-assessment)
- ✓ personal risk factor mitigation plan

It is important to remember that all of these documents are for your records. **Please do not send them to the CRPNM unless you are asked to do so.**

## References:

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# Appendix A: Standards of Psychiatric Nursing Practice Self-Assessment



College of Registered Psychiatric Nurses of Manitoba  
Continuing Competency Program

STANDARDS OF PSYCHIATRIC NURSING PRACTICE SELF-ASSESSMENT				
<b>Standard 1 Therapeutic Relationships</b>	Basic	Intermediate	Advanced	Priority for Professional Enhancement Plan
Continually applies the therapeutic use of self within professional practice.				
Recognizes and addresses power imbalances in therapeutic relationships.				
Ensures client needs remain the focus of the therapeutic relationship.				
Does not exploit the vulnerability of persons encountered through their practice.				
Will not engage in any sexual behaviour while in a therapeutic relationship with a client, with or without consent.				
Will not enter into a close personal or intimate relationship with a client or a former client who has received psychotherapeutic treatment from the Registered Psychiatric Nurse.				
Uses professional judgment, effective communication and interpersonal skills, and practices with integrity to establish, maintain and terminate the therapeutic relationship.				

Recognizes and addresses transference and counter-transference and their impact on the therapeutic relationship.				
Applies critical thinking and professional judgment in therapeutic relationships.				
Establishes and negotiates boundaries in therapeutic relationships.				
Practices according to the principles of informed consent and confidentiality.				
Will make best efforts to find suitable alternatives to treating their own family or friends.				
Develops partnerships using a client-centred, integrated and holistic approach.				

<b>Standard 2</b> <b>Competent, Evidence-Informed Practice</b>	Basic	Intermediate	Advanced	Priority for Professional Enhancement
Applies evidence-informed knowledge, skill, critical thinking and professional judgment to assess, plan, implement, and evaluate in the practice of psychiatric nursing.				
Incorporates evidence-informed knowledge to promote safety and quality in psychiatric nursing practice.				
Uses communication skills effectively.				
Integrates cultural competence and cultural safety into their practice with diverse clients.				
Recognizes potential risks and hazards and implements interventions to promote a safe environment.				
Integrates infection prevention and control principles in providing psychiatric nursing care.				

Documents the application of the clinical decision-making process in a responsible, accountable and ethical manner.				
Applies documentation principles to ensure effective written/electronic communication.				
Remains current in knowledge relevant to their practice.				
Incorporates knowledge of therapeutic modalities and conceptual models of psychiatric nursing.				
Coordinates client care and/or health services throughout the continuum of care.				
Establishes, maintains and coordinates a plan of care based on a comprehensive psychiatric nursing assessment.				

<b>Standard 3</b> <b>Professional Responsibility and Accountability</b>	Basic	Intermediate	Advanced	Priority for Professional Enhancement
Maintains current registration/licensure.				
Practises in accordance with all relevant legislation and regulation including the Standards of Psychiatric Nursing Practice.				
Exercises professional judgment when agency policies and procedures are unclear or absent.				
Assumes responsibility and accountability for continuing competence, and for meeting continuing competence requirements.				
Seeks out the necessary resources using skill and professional judgment to address personal and professional limitations.				
Recognizes the competencies and limitations of colleagues and/or students when assigning responsibilities.				

Responds to and/or reports unsafe practice, professional incompetence, professional misconduct, and incapacity or fitness-to-practice issues to the appropriate authority.				
Complies with any legal duty to warn and report, including abuse or potential harm to the public.				
Self-reports to the regulatory body conditions that compromise their fitness to practice.				
Uses technology, electronic communication and social media responsibly and professionally.				

<b>Standard 4 Leadership and Collaboration in Quality Psychiatric Nursing Practice</b>	Basic	Intermediate	Advanced	Priority for Professional Enhancement
Engages in practices that promote physical, environmental and psychological safety.				
Evaluates the effectiveness of interventions in psychiatric nursing practice.				
Participates in quality improvement activities to initiate change in psychiatric nursing practice and in the health care system.				
Collaborates with client, team members, families and other stakeholders to develop comprehensive psychiatric nursing care to achieve the client's health goals.				
Mentors' colleagues and stakeholders for the advancement of psychiatric nursing practice and quality health care.				
Promotes collaborative practice among health care professionals through respectful working				

relationships and appropriate documentation practices.				
Acts as a leader, teacher and role model to students, beginner practitioners and colleagues, supporting, Instructing and/or mentoring them in their professional development.				
Takes action to resolve professional practice issues.				
Collaborates with and advocates for clients.				
Demonstrates professional leadership through: <ul style="list-style-type: none"> <li>i) Building trusting relationships.</li> <li>ii) Creating empowering environments.</li> <li>iii) Supporting knowledge development and integration within the health care team.</li> <li>iv) Advancing psychiatric nursing practice and quality health care.</li> <li>v) Leading and sustaining change and balancing competing values and priorities.</li> </ul>				

<b>Standard 5 Professional Ethical Practice</b>	Basic	Intermediate	Advanced	Priority for Professional Enhancement
Practises with honesty, integrity and respect, demonstrating the ethics, standards, principles, guidelines and values of the profession.				
Applies the Code of Ethics in all areas of their practice.				
Identifies the effect of their own values, beliefs and experiences in relationships with clients, recognizes potential conflicts, and				

takes action to prevent or resolve them				
Applies ethical and legal considerations in maintaining confidentiality in all forms of communication.				
Supports the human, legal and moral rights of clients, including the right to make informed decisions and the right to live at risk.				

## Appendix B: Reserved Acts Self- Assessment



Continuing Competency Program

### Reserved Acts Self-Assessment

College of Registered Psychiatric Nurses of Manitoba

Under the *Regulated Health Professionals Act (RHPA)* and the *College of Registered Psychiatric Nurses of Manitoba General Regulation*, there are a number of reserved acts that require additional education before the registered psychiatric nurse performs the reserved act.

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
Reserved act 1: A registered psychiatric nurse may make a diagnosis that is appropriate to the registered psychiatric nurse’s practice and communicate it to an individual or the individual’s representative in circumstances in which it is reasonably foreseeable that the individual or representative will rely on the diagnosis to make a decision about the individual’s health care.				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
<p>Reserved act 2: A registered psychiatric nurse may (a) order or: (b) receive: reports of screening or diagnostic tests for the purpose of assessing, diagnosing or resolving a health condition that is appropriate to the registered psychiatric nurse’s practice if the registered psychiatric nurse practices in an approved practice setting and the registered psychiatric nurse: c) uses a clinical decision tool in place at the approved practice setting; or</p> <p>(d) collaborates with:  (i) a registered nurse (nurse practitioner);  (ii) a registered nurse (authorized prescriber);  (iii) a registered psychiatric nurse (authorized prescriber);  (iv) a physician;  (v) a physician assistant;  (vi) a clinical assistant; or  (vii) a pharmacist who is legally permitted and competent to order or receive those reports.</p>				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
Reserved act 3(a): A registered psychiatric nurse may perform a procedure on tissue below the dermis.				
<p>Reserved Act 3 (a) If a registered psychiatric nurse has completed additional education, the registered psychiatric nurse may perform a procedure on tissue below the dermis for the following purposes:</p> <ul style="list-style-type: none"> <li>(a) sharp wound debridement</li> <li>(b) suturing</li> <li>(c) venipuncture*</li> <li>(d) establishing intravenous access*</li> </ul> <p>*Additional education is not required for BScPN students who graduated after 2022 as it has been included in the program</p>				
Reserved act 3(b): A registered psychiatric nurse may perform a procedure on tissue below the surface of the mucous membrane.				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
Reserved act 3(c): If a registered psychiatric nurse has completed additional education, the registered psychiatric nurse may perform a procedure on the surface of the cornea for the purpose of fluorescein staining.				
Reserved act 4(a): A registered psychiatric nurse may insert or remove an instrument or a device, hand or finger into the external ear canal.				
Reserved act 4(b): A registered psychiatric nurse may insert or remove an instrument or a device, hand or finger beyond the point in the nasal passages where they normally narrow				
Reserved act 4(c): A registered psychiatric nurse may insert or remove an instrument or a device, hand or finger beyond the pharynx.				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
Reserved act 4(c): If a registered psychiatric nurse has completed additional education, the registered psychiatric nurse may insert or remove an instrument or a device, hand or finger beyond the pharynx for the purpose of establishing an advanced airway.				
Reserved act 4(d): A registered psychiatric nurse may insert or remove an instrument or a device, hand or finger beyond the beyond the opening of the urethra.				
Reserved act 4(e): A registered psychiatric nurse may insert or remove an instrument or a device, hand or finger beyond the labia majora.				
Reserved act 4(e): If a registered psychiatric nurse has completed additional education, a registered psychiatric nurse may insert or remove an instrument or a device, hand or finger beyond the labia majora for the purposes of cervical cancer screening or pelvic examination.				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
Reserved act 4(f): A registered psychiatric nurse may insert or remove an instrument or a device, hand or finger beyond the anal verge.				
Reserved act 4(g): A registered psychiatric nurse may insert or remove an instrument or a device, hand or finger into an artificial opening in the body.				
Reserved act 5(a): A registered psychiatric nurse may administer a substance by injection.				
Reserved act 5(b): A registered psychiatric nurse may administer a substance by inhalation.				
Reserved act 5(c): A registered psychiatric nurse may administer a substance by mechanical ventilation.				
Reserved act 5(d): A registered psychiatric nurse may administer a substance by irrigation.				
Reserved act 5(e): A registered psychiatric nurse may administer a substance by enteral instillation.				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
Reserved act 5(e): A registered psychiatric nurse may administer normal saline by parenteral instillation.				
Reserved act 5(e): If there is an order, a registered psychiatric nurse may administer a substance (other than normal saline) by parenteral instillation.				
Reserved act 5(f): If a registered psychiatric nurse has completed additional education and there is an order, a registered psychiatric nurse may administer a substance by transfusion.				
Reserved act 9: a registered psychiatric nurse may administer a drug, except a vaccine, by any method (except by intravitreal administration) in any of the following circumstances: (a) there is an order for the drug to be administered; (b) the drug is a non-prescription drug.				
Reserved act 9: A registered psychiatric nurse may administer a vaccine by any method in accordance with the provincial requirements in any of the following circumstances: (a) the vaccine is included in a publicly-funded provincial immunization program; (b) the vaccine is required as part of a communicable disease response;				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
(c) there is an order for the vaccine to be administered.				
Reserved act 10(a): A registered psychiatric nurse may apply ultrasound for the purpose of bladder volume measurement.				
Reserved act 10(a): If a registered psychiatric nurse has completed additional education and there is an order, a registered psychiatric nurse may apply ultrasound for the following purposes:  (a) blood flow imaging; (b) fetal heart monitoring				
Reserved act 10(b)(iv): If a registered psychiatric nurse has completed additional education and there is an order, a registered psychiatric nurse may apply electricity for the purpose of defibrillation.				
Reserved act 10(b)(vi): If a registered psychiatric nurse has completed additional education and there is an order, a registered psychiatric nurse may apply electricity for the purpose of electroconvulsive shock therapy.				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
Reserved act 10(b)(x): If a registered psychiatric nurse has completed additional education and there is an order, a registered psychiatric nurse may apply electricity for the purpose of transcutaneous cardiac pacing.				
Reserved act 10(e): A registered psychiatric nurse may order x-rays for the purposes of diagnosing a health condition or fracture that is appropriate to the registered psychiatric nurse's practice if the registered psychiatric nurse practises in an approved setting and the registered psychiatric nurse (a) Uses a clinical decision tool in place at the approved practice setting; or (b) Collaborates with: (i) a registered nurse (nurse practitioner), (ii) a registered nurse (authorized prescriber), (iii) a registered psychiatric nurse (authorized prescriber), (iv) a physician, (v) a physician assistant, or (vi) a clinical assistant; who is legally permitted and competent to order X-rays				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
<p>Reserved act 11(a): In relation to a therapeutic diet that administered by parenteral instillation, a registered psychiatric nurse may select ingredients for the diet if the registered psychiatric nurse has completed additional education and the registered psychiatric nurse collaborates with:</p> <ul style="list-style-type: none"> <li>(i) A registered dietician,</li> <li>(ii) A registered nurse (nurse practitioner), or</li> <li>(iii) A physician who is legally permitted and competent to select ingredients for the diet.</li> </ul>				
<p>Reserved act 11(b): In relation to a therapeutic diet that is administered by parenteral or enteral instillation, a registered psychiatric nurse may administer the diet if there is an order.</p>				
<p>Reserved act 13(a): A registered psychiatric nurse may put into the external ear canal, up to the eardrum, water that is under pressure equal to or less than the pressure created by the use of an ear bulb syringe or ear wash system.</p>				

Reserved Act	Education Level Rate your competence/education level out of 10 with 10 being the highest	Completed Approved Education Yes/No	Currently Implementing Reserved Act into Practice	Criteria Required for Additional Education Met click <a href="#">here</a>
<p>Reserved act 20: A registered psychiatric nurse may perform a psycho-social intervention with an expectation of modifying a substantial disorder of thought, mood, perception, orientation or memory that grossly impairs judgment, behaviour, the capacity to recognize reality, or the ability to meet the ordinary demands of life if the registered psychiatric nurse collaborates with a person who engages in health care as a practising member of a health profession regulated under the Act or a profession-specific Act listed in Schedule 2 of the Act and who is legally permitted and competent to perform it. Red zone psychosocial interventions found <a href="#">here</a>.</p>				

## Appendix C: General Regulation Part 4 Standards of Practice Self-Assessment



College of Registered Psychiatric Nurses of Manitoba  
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### GENERAL REGULATION PART 4 SELF-ASSESSMENT

Practice	Basic	Intermediate	Advanced	Priority for Professional Enhancement
<p><b>4.2(1) Client-centered practice.</b> A member must acknowledge their limitations in skill, knowledge and judgment and must ensure that they practise registered psychiatric nursing within those limitations.</p>				
<p><b>4.2(3)</b> When engaging in the practice of registered psychiatric nursing, a member must apply, as a framework, the nursing process, which is the systematic approach to the practice that encompasses all steps taken by the member in planning for the needs of the member's client, including assessment, diagnosis or determination, planning, implementation and evaluation.</p>				
<p><b>4.2(4)</b> The principles of client-centred practice in a clinical practice setting also apply to the practice of registered psychiatric nursing in the other domains such as, education, administration and research.</p>				
<p><b>4.2(5)</b> When engaging in the practice of registered psychiatric nursing in a clinical practice setting, a member must provide nursing care that includes <b>(a)</b> an assessment to determine the needs and circumstances of the client;</p>				
<p>4.2(5) <b>(b)</b> a care or treatment plan with the client or the client's representative and any other person who the client wishes to involve that takes into account the client's needs, circumstances, preferences, values, abilities and culture;</p>				
<p>4.2(5) <b>(c)</b> an evaluation of the outcomes of the care or treatment plan and the modification or discontinuance of the care or treatment plan as required and as discussed with the client or the client's representative;</p>				

Practice	Basic	Intermediate	Advanced	Priority for Professional Enhancement
4.25 (d) sufficient and timely communication with the client or the client's representative that takes into account the client's needs, circumstances, understanding and use of health information and enables the client or the client's representative to make informed decisions about the client's health care;				
4.25 (e) a referral of the client to another member or health care professional when appropriate;				
4.25 (f) support for the client in self-management of their health care by way of the provision of information, resources and referrals to enable informed decision making by the client or the client's representative.				
<b>4.3(1) Collaborative care.</b> When a member is involved in providing for the health care of a client, the member must (a) work collaboratively and cooperatively with clients, families and other health care providers in providing for the health care of the client and communicate effectively and appropriately with them;				
4.3(1) (b) ensure that they understand their role and the role of the other health care providers in providing for the health care of the client;				
4.3(1) (c) explain to the client or the client's representative the member's role and responsibility;				
4.3(1) (d) comply with any collaborative care decision tool in place at the practice setting where the member and other health care providers are providing for the health care of the client;				
4.3(1) (e) give the member's full name and designation of membership class to the client, the client's representative and any other person involved in the client's health care;				
4.3(1) (f) treat other health care providers with respect;				
4.3(1) (g) recognize the skills, knowledge and roles of others involved in the client's care;				
<b>4.3(2)</b> A member must document on the client record the nursing care provided by the member with enough information for another member or health care professional to be sufficiently informed of the care provided.				

<b>Practice</b>	Basic	Intermediate	Advanced	Priority for Professional Enhancement
<b>4.4(1) Follow-up to diagnosis and test results.</b> A member who orders a diagnostic test or makes a referral must have a system in place to review the test results and the results of referrals and have reasonable arrangements in place to follow-up with the client.				
<b>4.4(2)</b> A member who orders a diagnostic test and directs a copy of the result to another member or health care professional remains responsible for any follow-up care required unless the member to whom the copy of the results is directed has agreed to accept responsibility for the client's follow-up care.				
<b>4.5 Practice environment.</b> In providing nursing care, a member must demonstrate procedures that safeguard the hygiene and sanitation of the practice environment, and the hygiene and sanitation of the equipment used in that nursing care.				
<b>4.6(1) Client records</b> A member must appropriately document the nursing care provided by the member in a record specific to each client.				
<b>4.6(2)</b> A member must document the nursing care provided by the member in the client's record as the nursing care is provided or as soon as possible after the care is provided.				

## Appendix D: General Regulation Part 4 Standards of Self-Employed Practice



College of Registered Psychiatric Nurses of Manitoba  
Continuing Competency Program

### GENERAL REGULATOIN PART 4 STANDARDS OF SELF-EMPLOYED PRACTICE SELF-ASSESSMENT

<b>Self-Employed Practice</b>	Rate Adherence out of 10 (with 10 being the highest)	Existing Policy in your self- employed practice	Priority for Professional Enhancement
<p><b>Accepting clients in self-employed practice 4.8(1)</b> If a member restricts or selects clients for the member's practice or has a practice that is closed to new clients, the member must establish criteria for restricting or selecting the acceptance of clients. The criteria must be relevant to the member's competence in the restricted or selected area of practice, the nursing care to be provided by the member and the client's health care needs.</p>			
<p>4.8(2) On request, the member must give a prospective client a written copy of the restrictions or selection criteria.</p>			
<p>4.8(3) In special or exceptional circumstances, the member may accept as a client a person who does not meet the criteria or falls outside the restrictions for accepting clients established under subsection (1).</p>			
<p>4.8(4) If a member meets with a prospective client and does not accept them as a client, the member must explain the reason to the person unless disclosure of the reason could, in the member's opinion, be reasonably expected to (a) threaten the person's mental or physical health or safety; (b) threaten another person's mental health or physical health or safety; or (c) pose a threat to public safety.</p>			

<b>Self-Employed Practice</b>	Rate Adherence out of 10 (with 10 being the highest)	Existing Policy in your self- employed practice	Priority for Professional Enhancement
<p><b>Prohibited grounds for refusing clients</b> 4.9 A member must not refuse to accept a person as a client because (a) the nursing care required could or will be complex, unless the care the client requires is beyond the competency of the member; (b) the nursing care will or is likely to require the member to complete more documentation than is required for other clients; or (c) the nursing care required will or may take the member more time than is required for other clients.</p>			
<p><b>Ending client relationship</b> 4.10(1) A member who ends a professional relationship with a client must give notice to the client or the client's representative, have reasonable grounds for doing so and must document those reasons on the client record.</p>			
<p>4.10(2) A member must not end a professional relationship with a client because the nursing care required by the client (a) is or will be complex, unless the care the client requires is beyond the competence of the member; (b) requires the member to complete documentation in addition to the client record; or (c) takes the member more time to provide than is required for the member's other clients.</p>			
<p>4.10(3) Despite subsection (2), a member may immediately terminate a professional relationship with a client if (a) the client poses a safety risk to the office staff, other clients or the member; (b) the client is abusive to the office staff, other clients or the member; (c) the client does not respect professional boundaries or acts in an inappropriate manner; or (d) the member is leaving the practice of registered psychiatric nursing because of personal illness or other urgent circumstances. The member must document on the client record the reason for terminating the relationship.</p>			

<b>Self-Employed Practice</b>	Rate Adherence out of 10 (with 10 being the highest)	Existing Policy in your self- employed practice	Priority for Professional Enhancement
<b>Notice of required payment</b> 4.11 Before providing nursing care, the member must notify the client of any fee or charge the client will be required to pay for that care.			
<b>Client records retention</b> 4.12(1) A client record must be retained by the member having last custody of the record for at least 10 years after the date of the last entry on the record and the client records of minors must be retained for at least 10 years after the date the minor becomes 18 years old.			
4.12(2) If a client or the client's representative requests a member to transfer client records to another member, the requested member must ensure that the request is completed as promptly as required in the circumstances but not later than 30 days after the member receives the request.			
<b>Closing, leaving or moving a self-employed practice</b> 4.13(1) A member must give to the member's clients or their representatives and the college written notice of the member's intention to close the member's practice, to take a leave of absence or to relocate their practice or otherwise cease to practise in Manitoba.			
4.13(2) The notice must include information about where the client records are to be located and how the records can be transferred to another member or how copies of the records can be obtained.			

<b>Self-Employed Practice</b>	Rate Adherence out of 10 (with 10 being the highest)	Existing Policy in your self- employed practice	Priority for Professional Enhancement
<p><b>Storage and disposition of client records and supplies</b> 4.14(1) A member who closes the member's professional practice or takes a leave of absence must (a) ensure the secure storage of any client records for the remainder of the retention period required and ensure the destruction of the information in accordance with The Personal Health Information Act; and (b) give the college a copy of the notice sent to clients, information about to whom the notice was sent and the arrangements that have been made for the secure storage of client records.</p>			
<p>4.14(2) A member who ceases to engage in the practice of registered psychiatric nursing, temporarily or permanently, must safely dispose of medications, laboratory specimens, equipment and supplies.</p>			

## Appendix E: Personal Factors- Risk Management Plan

Personal Risk Factors Identified	Management/Protective Factors	Outcome

# Appendix F: Annual Learning Plan

Membership Year: \_\_\_\_\_

<b>ASSESSMENT</b>	<b>PLANNING</b>	<b>INTERVENTION</b>	<b>DATE</b>	<b>EVALUATION</b>
What did you assess you needed? Was it knowledge, skills or both? State your learning objective:	What kinds of things could you do to meet your learning objective?	What kinds of things did you do to meet your learning objective?		Were you able to meet your objective? What is the impact on your practice?