

SASKATCHEWAN

RN

ASSOCIATION

Self-Employed Practice Guideline

Effective: February 2, 2021



Self-Employed Practice

Self-employed Registered Nurses (RN) and Nurse Practitioners (NP) improve access to health care services for the residents of Saskatchewan by practicing within their scope and using their expertise in the practice environment. Self-employed practitioners apply their knowledge, skills and judgment in many roles that enable individuals, families, groups, communities and populations to achieve optimum levels of health. These practice environments may be individual, collaborative or administrative. Self-employed practice may also be termed private practice, independent practice, contracting or consulting.

Examples of self-employed practice include health promotion and prevention services such as smoking cessation, health education and risk screening; curative, restorative or palliative care such as home care, foot care and mental health services; or serving as a consultant to agencies on health care related issues.

All RNs and NPs in any area of practice are required to practice within the applicable standards, entry-level competencies and code of ethics. It is recommended that the RN and NP pursuing self-employed practice review the current Canadian Nurses Association (CNA) *Code of Ethics for Registered Nurses*, *SRNA Registered Nurse Practice Standards*, *Registered Nurse Entry-Level Competencies*, *the Registered Nurse (Nurse Practitioner) Practice Standards* and *the Registered Nurse (Nurse Practitioner) Entry-Level Competencies* as appropriate. The information contained in this guideline is current as of the publication date.

Regulatory Authority

The Registered Nurses Act, 1988 (the Act) provides the legislative authority for registered nurse practice in Saskatchewan. Section 15(2) of the Act enables the SRNA to create bylaws that:

- prescribe the powers and procedures of the Council;
- provide for a code of professional ethics;
- set the standards for professional conduct, competency and proficiency of nurses; and,
- further specify categories of practice and the rights and privileges of those categories.

SRNA Bylaw IV details the privileges and obligations of practicing members. Obligations of practicing members include adhering to the code of ethics, nursing standards and competencies that are incorporated by reference in Bylaw XV and set the standards for professional conduct, competency and proficiency of nurses.

Through the authority in the Act, Council creates and applies policies and procedures to approve standards and guidelines that set the expectations for registered nursing practice in Saskatchewan. The role of this guideline is to provide information to support the application of the standards and competencies for self-employed practice.

Standards and competencies that apply to self-employed practice include:

- Entry-level Competency: Professional
 - Maintains client privacy, confidentiality and security by complying with legislation, practice standards, ethics and organizational policies

- Entry-level Competency: Communicator
 - Engages in active listening to understand and respond to the client’s experience, preferences and health goals
 - Documents and reports clearly, concisely, accurately and in a timely manner
- Entry-level Competency: Advocate
 - Advocates for safe, competent, compassionate and ethical care for clients
- Standard 1: Professional Responsibility and Accountability
 - Demonstrates effective communication
 - Contributing to the development and integration of quality improvement principles and activities into nursing practice
- Standard 2: Knowledge-Based Practice
 - Utilizes nursing informatics and other information and communications technology in practicing safe registered nursing care
- Standard 3: Ethical Practice
 - Using an ethical and reasoned decision-making process to address situations of ethical distress and dilemmas

Legislation

Scope of Practice

The legislated scope of nursing practice refers to the range of services or activities in which RNs and NPs may engage and provides a foundation for individual practice based on individual competence.

RNs are legally permitted to offer health services that fall within the practice of nursing as interpreted by the SRNA. Section 2(k) of *The Registered Nurses Act, 1988* clearly defines the scope of practice. Section 2(k) states:

In this Act:

(k) “**practice of registered nursing**” means the performance or co-ordination of health care services including but not limited to:

(i) observing and assessing the health status of clients and planning, implementing and evaluating nursing care; and

(ii) the counselling, teaching, supervision, administration and research that is required to implement or complement health care services; for the purpose of promoting, maintaining or restoring health, preventing illness and alleviating suffering where the performance or co-ordination of those services requires:

(iii) the knowledge, skill or judgment of a person who qualifies for registration pursuant to section 19 or 20;

(iv) specialized knowledge of nursing theory other than that mentioned in subclause (iii);

(v) skill or judgment acquired through nursing practice other than that mentioned in subclause (iii); or

(vi) other knowledge of biological, physical, behavioural, psychological and sociological sciences that is relevant to the knowledge, skill or judgment

described in subclause (iii), (iv) or (v)

Self-employed RNs and NPs must comply with the Act, the current practice standards, entry-level competencies, code of ethics, SRNA bylaws and policies when providing care. In addition to the professional requirements, RNs and NPs in self-employed practice need knowledge of and practice in compliance with relevant health care legislation, privacy laws and business regulations.

Recognition of Nursing Practice and Use of Title

Recognition of Practice is a regulatory process whereby the SRNA determines if the practice of a self-employed RN and NP is approved nursing practice.

Nursing services provided by self-employed RNs and NPs need to be recognized as approved nursing practice by the SRNA for the following reasons:

- liability protection through Canadian Nurses Protective Society (CNPS) while providing approved nursing services;
- use of the title of nurse, e.g., RN, Reg.N, or NP; and,
- ability to count the practice hours worked as an eligibility requirement of the annual renewal.

RNs and NPs should consult with the SRNA prior to becoming self-employed to ensure the services they are planning to provide are recognized and approved nursing services. Through the recognition of practice process the practitioner provides the Registrar with documentation about the services they wish to provide. The Registrar then reviews the documentation to determine if the services are within the scope of practice of the practitioner. Contact SRNA's Regulatory Services for more information. A self-employed RN or NP can only use the title of nurse, RN, Reg.N. or NP when providing approved nursing care services as outlined in the Act and approved by the SRNA.

Liability Protection

RNs and NPs who hold a practicing license with the SRNA have liability protection through the Canadian Nurses Protective Society (CNPS). CNPS is an independent, not-for-profit society that is specifically tailored to meet the professional liability needs of nurses in all nursing roles and provides liability coverage for professional nursing services that are recognized by the SRNA.

RNs and NPs who are self-employed must be knowledgeable about licensing requirements, professional obligations, accountability and liability protection. Prior to starting practice the nurse should consult with a business lawyer, an accountant and/or tax specialist to review business structures and tax and legal implications of self-employed practice.

RNs and NPs who are self-employed need to determine the level of liability risk associated with their nursing practice to determine if they require additional personal, professional or business liability insurance. All RNs and NPs actively licensed by the SRNA have paid fees for core professional liability insurance coverage with the CNPS. Contact CNPS for more information related to liability protection.

Continuing Competence Program

As practicing SRNA members, self-employed RNs and NPs are required to participate in the Continuing Competence Program (CCP). Every RN and NP must complete the CCP annually as part of the requirements to hold a license to practice registered nursing in Saskatchewan, even for a partial year. For more information on the Continuing Competence Program, see the [SRNA website](#).

Responsibilities

RNs and NPs in self-employed practice assume full responsibility and accountability for the provision of safe, competent client care. This professional autonomy requires commitment from all RNs and NPs to:

- hold a current practicing membership with the SRNA;
- practice within their scope of practice in accordance with SRNA practice standards, entry-level competencies and code of ethics;
- demonstrate knowledge, skill and judgment in their practice domain;
- complete the annual SRNA continuing competence requirements; and,
- utilize current evidence-informed practice and applies that knowledge.

Additional responsibilities of self-employed practice includes:

- developing written description of the scope (job description) of the intended area of practice;
- developing written policies and procedures, in accordance with SRNA practice standards, entry-level competencies and guidelines to describe nursing practice;
- developing written policies to address hours of work, client referral procedures, client evaluation of service, business and financial management and liability insurance coverage;
- utilizing a documentation system that meets professional and legal requirements (see Documentation Guidelines for Registered Nurses, SRNA 2021); and,
- implementing quality improvement and risk management strategies for maintaining quality of practice.

There may be situations where self-employed RNs are providing services that are considered an RN Specialty Practice (RNSP). In such settings, it is the responsibility of the RN to ensure there is an RN Clinical Protocol in place that includes the essential components for RNSPs. RN Clinical Protocols:

- are in the best interest of the client and appropriate to the client's environment;
- use evidence-based approaches;
- have an authorizing mechanism in place; and,
- identifies the RN competencies required to provide safe care.

See *Registered Nurse Specialty Practices Guideline* for more information (SRNA, 2020).

Confidentiality

The Canadian Nurses Association (2017) defines the nursing value *Maintaining Privacy and Confidentiality* as, “Nurses recognize the importance of privacy and confidentiality and safeguard personal, family and community information obtained in the context of professional relationship.”

If a request for health information is made, self-employed RNs and NPs disclose only the information that is required and inform only those who are involved (i.e., another RN, NP, physician or appropriate authorities). The client should sign a release of information consent. Additionally, the information that was sent and to whom it was sent should be recorded. Contact CNPS for additional advice regarding confidentiality and disclosure of client information.

There are situations where self-employed RNs and NPs are obligated to disclose confidential client information. Self-employed RNs and NPs must be aware of their responsibility to report such things as:

- suspected child abuse;
- certain communicable diseases;
- gun shots and stabbings; and,
- release of information under the authority of a court order or during legal proceedings.

All client health records, in any form, are confidential and are always to be kept physically and electronically secured. RNs and NPs who engage in self-employed practice need to adhere to provincial legislation regarding privacy and confidentiality. In Saskatchewan, the provincial legislation is the *Health Information Protection Act, 1999* (HIPA). The HIPA document can be accessed from the Government of Saskatchewan website.

Consent

A professional responsibility of self-employed RNs and NPs is to obtain informed consent, whether in person or via technology, prior to the provision of any nursing services. RNs and NPs must have the knowledge, skills and judgment to provide safe, competent and ethical care to the client. If there is a need to refer the client to another care provider, consent should be obtained from the client prior to making the referral.

Conflict of Interest

Ethical Considerations

Self-employed RNs and NPs are required to comply with the current CNA *Code of Ethics for Registered Nurses*. The nurse shall not exploit any relationships they have established as a practitioner in a setting outside of their self-employed practice to further their own interests at the expense of the client.

Employment

Conflict of interest must be avoided by self-employed RNs and NPs. For transparency, RNs and NPs who are self-employed as well as employed by a health care agency, should disclose their self-employment to the employer. RNs and NPs should be aware of the employer's conflict of interest policies. Client referrals from employment related contacts of RNs and NPs to self-employed services of the same RNs and NPs should not be made. RNs and NPs should declare any actual or perceived conflict of interest related to options or services with the client.

Treatment of Family or Friends

Providing care to friends, family members or acquaintances should be limited and done with caution. Ideally, family members should be directed or referred, with consent, to another care provider as soon as able; however, there may be times when this is not possible. In this type of situation, there must be careful consideration of the impact of providing or not providing care to the client and the possible outcomes for the client.

Endorsements

Endorsement or promotion of products is considered a conflict of interest. Self-employed RNs and NPs cannot use their title to promote their personal interest in commercial products. Use of title can lead clients to believe that one product is superior to another.

Compensation

Saskatchewan does not provide individual billing numbers for nurses to directly bill any public health insurance plan for the insured health services they provide to their clients. Therefore, it is imperative for self-employed RNs and NPs to be aware of and understand any billing or fee for service legislation applicable to the services provided.

Information Management

Documentation is an entry level-competency. All RNs and NPs in all roles, including self-employed practice are required to document all aspects of client care, i.e., the nursing process, accurately and thoroughly.

Self-employed RNs and NPs must adhere to federal and provincial legislation regarding records retention including those that are documented on paper and/or electronically. Self-employed RNs and NPs should review federal and provincial legislation, code of ethics and SRNA *Documentation Guidelines* to ensure they are adhering to the legal requirements. It is advisable to contact the Office of the Saskatchewan Information and Privacy Commissioner or access (HIPA) to become informed of privacy law in Saskatchewan.

Information management must include the following:

- confidentiality of the client information;
- accurate records of the services provided and actual client outcomes;
- documentation of the client's consent for services and/or the agreed business contract; and,
- the appropriate storage, retention, and authorized release of client information.

Self-employed RNs and NPs must maintain complete and accurate client and financial records. As the custodian of client information, the obligation for storage and retention of client records may not end at the conclusion of the nurse-client relationship. Self-employed RNs and NPs may be responsible for the retention of personal health information for several years. It is advisable for self-employed RNs and NPs to contact CNPS and the Office of the Saskatchewan Information and Privacy Commissioner regarding the retention and disposal of personal health information. Disposal of client health information must be done according to federal and provincial privacy legislation.

Policy and Procedure Development

Self-employed RNs and NPs are responsible for development of policies and procedures to guide their practice. When developing policies and procedures RNs and NPs must adhere to the Act, the practice standards, entry-level competencies and CNA *Code of Ethics*. Policies should be created for both the nursing services to be provided and for the business aspect of their practice. Nursing policies for self-employed RNs and NPs should include scope of the services provided, the necessary referral mechanism in place, the quality monitoring mechanisms used, and advertising and certification of competencies to ensure for client safety.

It is advisable for self-employed RNs and NPs to consult with a lawyer regarding business policy development. Policy development should include the business budget, client accounts, billing, and the filing of tax forms.

Quality Improvement and Risk Management

Ongoing evaluation is important to ensure clients are receiving safe, competent and ethical nursing care. Feedback, both formal and informal, provides self-employed RNs and NPs with information to assess the effectiveness of services provided and the potential need to expand services. As well, self-employed RNs and NPs can benefit from a professional support system. A support system can assist self-employed RNs and NPs to discuss practice concerns and promote the sharing of information and lessons learned.

Some quality improvement and risk management strategies for maintaining quality of practice include:

- development, regular review, revision and adherence to business related policies and procedures;
- development, regular review, revision and adherence to nursing practice related policies and procedures;
- measurement of client care outcomes;
- regular feedback from customers and clients;
- consultation with peers and role models;
- a comprehensive information management system; and,
- knowledge of best practice standards and adherence to laws and regulations related to the business.

Advertising

Self-employed nurses can advertise the services they provide to the public. Advertising should be presented in a manner that is consistent with practice standards, entry-level competencies and the code of ethics.

The self-employed nurse must include their name and protected title in their advertising. Advertising for the services provided should include a written description of services provided, including the risks and benefits of the service. Also included in the advertising should be the cost of services and the qualifications of the health care provider who would be delivering the service.

Advertising must be presented in such a manner that it maintains the public trust in the nursing profession. Advertising should not mislead the public with exaggerated claims of the effectiveness of the service being provided. False or misleading advertising may be considered professional misconduct and could lead to an investigation by the SRNA. It is a conflict of interest and unethical for self-employed RNs and NPs to promote their self-employed services in a health care agency when employed by the health care agency.

Conclusion

Self-employed RNs and NPs play a role in expanding access to quality health care for their clients in unique ways. With adherence to the nursing practice standards, entry-level competencies, code of ethics and the various federal and provincial legislations, increased access to health care can be achieved safely and competently and in the best interests of the residents of Saskatchewan.

Appendix A - Self-Employed Practice Checklist

Agencies to contact:

- SRNA – Recognition of Practice
- CNPS – Liability Protection, privacy and confidentiality, policy development, advertising
- Office of the Saskatchewan Information and Privacy Commissioner – Record security – Record retention, privacy, disclosure
- Legal Counsel – Policy development
- Insurance agency – Business insurance
- Accountant and/or tax specialist – Business and financial management
- Saskatchewan Health Authority, Government of Saskatchewan – public health regulations

Applicable Documents

- Registered Nurse Practice Standards
- Registered Nurse Entry-level Competencies
- Registered Nurse/Nurse Practitioner Practice Standards
- Registered Nurse/Nurse Practitioner Entry-level Competencies
- Code of Ethics for Registered Nurses
- Documentation Guidelines for Registered Nurses
- Registered Nurse Specialty Practices Guideline
- Medication Management for RNs: A Patient Centred Decision-making Framework

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