



Ending the Nurse Practitioner-Client Relationship

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Introduction

Nurse Practitioners (NP) have a professional obligation to provide safe, competent and ethical care for the well-being of the public (Saskatchewan Registered Nurses Association [SRNA], 2017). NPs are responsible for establishing therapeutic, caring and culturally safe client relationships (SRNA, 2017a). Therapeutic nurse-client relationships are at the core of nursing practice (College of Nurses of Ontario [CNO], 2020). While the therapeutic relationship is central to the practice of nursing, circumstances may arise (e.g., planned and unplanned leaves from practice or other) that lead to the end of the NP-client relationship (College of Physicians and Surgeons of Ontario [CPSO], n.d.). This resource supports the professional practice of registrants of the College of Registered Nurses of Saskatchewan (CRNS) by providing considerations for NPs on ending the NP-client relationship. This resource:

- reviews the importance of the establishment and maintenance of the therapeutic NP-client relationship;
- provides guidance on ending the NP-client relationship;
- outlines matters to consider before ending the NP-client relationship;
- reviews steps for finalizing the NP-client relationship;
- outlines considerations when leaving practice (temporarily and/or permanently); and,
- discusses the ethical and reasoned decision-making process a self-employed NP engages in when considering ending the NP-client relationship.

Regulatory Authority

The Registered Nurses Act, 1988 (the Act) provides the legislative authority for Registered Nurse practice in Saskatchewan. This resource, related to ending the NP-client relationship, draws on the obligations of practicing registrants to comply with the current Nurse Practitioner Practice Standards, Nurse Practitioner Entry-Level Competencies and Canadian Nurses Association (CNA) Code of Ethics for Registered Nurses. NPs are responsible and obligated to be aware of, understand and adhere to NP practice expectations when practicing nursing in any setting in Saskatchewan (SRNA, 2017a)..

Establishing the Therapeutic NP-Client Relationship

The NP is responsible for establishing and maintaining the therapeutic relationship and ensuring that care is comprehensive and in the client's interest in their current environment (SRNA, 2017a). The NP "engages in critical inquiry to inform clinical decision-making, establishes therapeutic, caring and culturally safe relationships with clients" (SRNA, 2017a, p. 4). The NP also:

- uses appropriate communication strategies to create a safe and therapeutic environment for client care (SRNA, 2017);
- discusses with clients and families any concerns that may impact the NP-client relationship (SRNA, 2017a); and,
- uses relational strategies to establish therapeutic relationships (SRNA, 2017).

Please review [Professional Boundary Considerations for Nurse-Client Relationships](#) for additional information on professional boundaries for therapeutic nurse-client relationships.

Ending the NP-Client Relationship

The NP is an ethical practitioner, complying with current NP Practice Standards, NP Entry-Level Competencies and the Code of Ethics for Registered Nurses, and is professionally responsible for providing equitable health services. NPs "apply theory and knowledge from nursing and other disciplines to provide a comprehensive range of essential health services grounded in professional, ethical and legal standards within a holistic model of care" (SRNA, 2017, p. 4). NPs work collaboratively with their clients to establish holistic health goals and identify and advocate to close gaps in health outcomes (SRNA, 2017).

In all practice settings, NPs promote justice by safeguarding fairness and minimizing interruptions to the continuity of care (CNA, 2017). When considering ending the NP-client relationship, NPs must consider several key issues before ending the relationship to ensure any actions taken do not result in professional misconduct as defined in the Act, specifically section 26(2)(e), “wrongful abandonment of a client” (Government of Saskatchewan, 1988, p. 17). As such, an NP considering ending the NP-client relationship complies with the *NP Practice Standards, NP Entry-Level Competencies and Code of Ethics*.

Matters to Consider

Before ending the NP-client relationship, first, consider the following:

- Who is requesting the termination of the relationship – the client or the NP? If the latter, the NP determines if ending the NP-client relationship is prohibited under legislation.
- Is the client vulnerable in terms of ongoing care requirements?
- Is the decision to end the NP-client relationship in the client’s best interest?
- Have reasonable attempts to resolve the issue(s) that is impacting the relationship been made (Canadian Nurses Protective Society [CNPS], 2017)?

When it may be Appropriate to End the NP-Client Relationship

There may be situations where ending the NP-client relationship would not be untoward. The NP may discontinue their professional relationship with a client in circumstances such as:

- the client requests discontinuation of the professional relationship;
- a planned leave from practice;
- the standing of the NP does not permit them to meet their professional responsibilities for aspects of client care (e.g., licensure restrictions);
- the client and/or the client’s family exhibits threatening or abusive behaviour toward the NP;
 - in a situation that poses a genuine risk of harm to the NP, staff, or others, the NP may end the NP-client relationship immediately and is not obligated to engage directly with the client (CPSO, n.d.); or,
- the NP-client relationship has eroded to the point where the NP can no longer meet their professional obligations (i.e., the provision of safe, competent and ethical care) toward the client (British Columbia College of Nurses and Midwives [BCCNM], n.d.; CNO, 2021; SRNA, 2017).

Ending the NP-client relationship when a client still requires nursing services is generally a measure of last resort (unless, for example, a planned leave from practice) and requires particular attention to the necessary formalities of ending the NP-client relationship to ensure professional misconduct is not warranted (CNPS, 2017). Before ending the NP-client relationship, the NP considers consulting with their employer and/or manager and, if appropriate, with employer legal and risk management teams. In addition, the NP may seek legal advice and risk management with [CNPS](#), as well as contact the CRNS and speak with a CRNS [Nursing Advisor](#).

When it is Not Appropriate to End the NP-Client Relationship

It would not be appropriate to end the NP-client relationship in circumstances such as:

- prohibited grounds of discrimination, as outlined in the [Saskatchewan Human Rights Code](#);
 - for example, religion, creed, marital status, sexual orientation, disability, or age (Government of Saskatchewan, 2018);
- the client respectfully refuses to follow the NP’s health advice;
- the client’s lifestyle choices;
- the client fails to keep appointments;
- the client files a complaint against the NP; or,
- the client requests access to a service or seeks treatment the NP has a conscientious objection to (College of Physicians and Surgeons of Saskatchewan [CPSS], 2020; BCCNM, n.d.; Nova Scotia College of Nursing [NSCN], 2022).

Finalizing the NP-Client Relationship

First Step: Seek Resolution

When an issue first emerges that may impact the NP-client relationship, the NP has a professional obligation to make reasonable attempts to address or resolve the underlying issue(s). Consider the following:

- identify and review employer policies, processes or resources that may provide additional guidance;
- discuss with the client any issue or situation – as they arise that may impact the NP-client relationship;
- document all exchanges of pertinent client information;
- please refer to the CRNS [Documentation Guideline](#) for further details on the principles of documentation;
- identify personal beliefs, values and biases that impact culturally safe care;
- work with the client to develop and implement strategies for resolving the issues(s) impacting the NP-client relationship, wherever feasible; and,
- if appropriate, communicate concerns to the manager/employer or other members of the health care team to resolve the matter (CNO, 2021; BCCNM, n.d.; NSCN, 2022; SRNA, 2017).

If the issue(s) persists or worsens, consider:

- re-communicating concerns to the client and, if appropriate, to the manager/employer and reviewing the strategies that were initially agreed upon to resolve the issue(s);
- evaluating the need to amend initial strategies or develop and implement new ones to reach a resolution (NSCN, 2022); and,
- determining and communicating with the client all necessary services that will continue to be provided in the interim while the client is arranging a suitable alternative care provider (CNPS, 2017).

Subsequent Step: Ending the NP-Client Relationship

If, despite reasonable attempts to resolve the underlying issue(s), the NP-client relationship remains non-therapeutic, it may be appropriate for the NP to end the professional relationship with the client. Should this occur, the NP exercises professional judgment, follows an ethical decision-making process and considers the following:

- notify the employer of the intent to end the NP-client relationship;
 - if available, follow employer policies regarding the discharge of a client from care. Employer policies on ending the relationship should ensure that the ending of the relationship is safe, transparent and considers the client's best interest. If such policies are not available, advocate for the same;
- communicate the decision to end the NP-client relationship to the client and the reasons for the decision;
 - consider the client's needs when terminating the NP-client relationship;
 - continue to provide essential health care services, whenever feasible, until another provider has been identified and inform the client of the same;
 - assist the client in identifying and securing an alternative care provider;
 - provide the client information on how to access emergency services, if needed;
 - provide a safe transition to another care provider; and,
- document the reason for the decision to discontinue services, including steps taken to resolve the issues before ending the relationship and the client's response to them, and accommodations made to ensure continuity of care (CPSS, 2020; CNO, 2021; BCCNM, n.d.)

Leaving Practice – Temporarily or Permanently

An NP may leave practice or their current role/position either temporarily or permanently (e.g., maternity leave, retirement, moving provinces, closing their self-employed practice, etc.). Regardless of the circumstances surrounding the NP's need to leave practice, the continuity of client care is to be assured, including actions taken to minimize interruptions to care. When leaving practice, the NP practices safely and competently in accordance with the NP Practice Standards, NP Entry-Level Competencies and Code of Ethics. The NP employs their professional judgment and clinical reasoning to determine what is reasonable and expected in their practice setting and considers which of the following may apply when leaving practice:

- comply with all relevant employer policies and processes to assist in the transfer of client care and client information. In the absence of employer policies, advocate for employer policies that are equitable and comprehensive and enable the facilitation of a seamless transition of care in the interest of the client;
- review and comply with one's employment contract;
- inform the client, employer, referring health care providers, and colleagues at the earliest opportunity to allow reasonable notice and subsequent arrangements to be made accordingly;
 - the NP tailors each notice period after careful consideration of matters such as the availability of alternative health care providers in the client's community and the client's immediate health care needs;
- document the reason for ending the NP-client relationship in the client's record, including any communication with the client;
- in addition to verbally communicating the decision to end care with the client, provide written notification to the client of the decision to terminate care, including the rationale for the decision and the date the relationship will conclude. Include a copy of this letter in the client's medical record;
- make the necessary arrangements to store and/or transfer client records to the appropriate health care provider(s), as appropriate and per employer policy. Advise the client how they may access copies of their medical records if required;
- when possible, provide a hand-over report to the most appropriate health care provider(s) to ensure the continuity of care;
- implement a process to manage all outstanding reports, investigations, and/or tests to be reviewed and acted upon by the most appropriate care provider;
- notify clients that all written prescriptions, including refills, will expire one year from the written day. To note, written prescriptions are considered legally valid prescription if the prescription is not more than a year old;
 - ensure the client has appropriate medication coverage for such situations as retirement or primary health care provider change. Consider the appropriateness of intentionally writing prescriptions for a period that extends beyond the NP's leave/retirement (Saskatchewan College of Pharmacy Professionals, 2019); and,
- notify all relevant organizations of their departure date, and, if applicable, the CRNS of any change in membership status (BCCNM, n.d.; CPSS, 2020; NSCN, 2022).

Note, privacy legislation may provide clients with the right to restrict information passed between providers. As such, seek legal and risk management advice on how to proceed. In addition, obtain the appropriate authorization from the client before transferring copies of health records.

Self-Employed Practice

NPs engage in a self-employed practice, practicing within their scope, utilizing their expertise, and applying their knowledge, skills, and judgment in various roles to improve access to health care services for the residents of Saskatchewan. In addition to complying with professional requirements, NPs engaged in self-employed practice need to be aware of and practice in compliance with relevant health care legislation, privacy laws and business regulations (SRNA, 2017; SRNA, 2021).

An NP considers the unique situation of each NP-client relationship and the guidance outlined in this resource to help determine the most appropriate actions to take when ending the NP-client relationship, ensuring their professional obligations are met. Additional considerations for an NP in self-employed practice include and are not limited to:

- the development of written policies to address ending the NP-client relationship;
 - consider policies that address planned and unplanned leaves from practice and ending the NP-client relationship for unexpected situations and/or for professional relationships that are no longer therapeutic;
- documentation of the client's consent for services and/or the professional contract;
 - note, the contract should stipulate the anticipation of how and when the contractual relationship might end; and,
- determine the level of liability risk associated with the self-employed practice and the need to obtain additional personal, professional or business liability insurance (CNPS, 2021; SRNA, 2021).

Conclusion

The purpose of this resource is to support the application of the *NP Practice Standards*, *NP Entry-Level Competencies* and *Code of Ethics* for therapeutic NP-client relationships. The NP uses an ethical, evidence-based and reasoned decision-making process and considers the context of the relationship to ensure they meet their professional obligations and provide safe, competent and ethical care. When an issue first emerges that may impact the NP-client therapeutic relationship, the NP makes reasonable attempts to address or resolve the issue. If the NP-client relationship is no longer therapeutic, or the NP is temporarily or permanently leaving practice, the NP complies with their standards, competencies and code of ethics when ending the NP-client relationship.

Resources

Internal

[SRNA Bylaws](#)

[NP Practice Standards](#)

[NP Entry-Level Competencies](#)

[Code of Ethics for Registered Nurses](#)

[Documentation Guideline](#)

[Professional Boundary Considerations for Nurse-Client Relationships](#)

[Self-Employed Practice Guideline](#)

External

[CNPS](#)

[Saskatchewan Human Rights Code](#)

[Ask a Lawyer: Ending the NP-Client Relationship](#)

References

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