Introduction
The College of Registered Nurses of Nova Scotia (CRNNS) works with registered nurses (RNs) and the public to regulate the profession of nursing and promote excellence in nursing practice. As self-regulating professionals, RNs in Nova Scotia are accountable and responsible to ensure clients are provided safe, competent, compassionate and ethical nursing care.

RNs have a legal and ethical obligation to report incompetent, unethical or impaired practice of an RN, or unethical conduct by any regulated health professional, to CRNNS or appropriate regulatory body. [Registered Nurses Act, 2006 (RN Act); Standards of Practice for Registered Nurses, 2017; Code of Ethics for Registered Nurses, 2008].

This document is designed to help RNs understand their legal and ethical responsibilities and to offer guidance should RNs encounter these challenging situations in their practice setting.

Legal Duty
In Nova Scotia, the Registered Nurses Act (2006) is the legislative document that establishes the legal responsibilities for registered nurses. According to the RN Act, if a registered nurse has reasonable grounds to believe another RN or regulated health professional has:

• engaged in professional misconduct, incompetence or conduct unbecoming the profession;
• is incapacitated;
• is practicing in a manner that otherwise constitutes a danger to the public;

the informed RN is required to file a written report to CRNNS or the health professional’s appropriate regulatory body.

RNs who fail to report these situations could be subject to discipline by their employer and by CRNNS.

Ethical Duty
The RN has the ethical responsibility, as outlined in the Code of Ethics for Registered Nurses (2008), to question and report, “unsafe, non-compassionate, unethical or incompetent practices or conditions that interfere with their [RN] ability to provide safe and compassionate competent ethical care” (p. 9). Nurses must be attentive to indications that a colleague is unable to provide such care regardless of the reason. In this situation, the nurse is obligated to take the steps necessary to ensure safe care is provided. Reporting a situation that may protect client safety is not defamation or whistle blowing but is an RNs professional obligation. (CNPS, 2003; ARNNL, 2008.)

Regardless of legal and ethical requirements these situations can be distressing. Nurses may feel conflicted, wanting to do the right thing to protect clients, but not wanting to lay blame on a colleague. Considering the following points may be helpful:

• Primary concern must always be for the needs and safety of the client
• Focus on safe client care, not laying blame
• Application of appropriate standards of practice to the situation
• Adherence to principles of fairness, respect, dignity and honesty (ARNNL, 2006)
It is not always easy to determine when a behaviour you have witnessed constitutes a professional practice concern in which you need to intervene. Examples of behaviours/situations that may be of concern are listed below in Table 1.

**TABLE 1.**

Examples of situation or behaviours that could negatively impact client safety or quality of care include, but are not limited to:

<table>
<thead>
<tr>
<th>Negative Impact on Client Safety or Quality of Care</th>
<th>Professional Practice Concerns</th>
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<tbody>
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<td>Under the influence of drugs/alcohol in the workplace</td>
<td>Repeated errors</td>
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<tr>
<td>Confidentiality breaches</td>
<td>Verbal, physical, mental or sexual abuse of clients</td>
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<td>Falsifying information</td>
<td>Boundary violations</td>
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<tr>
<td>A pattern of unsafe behaviour/practices related to medication administration, assessment, intervention, monitoring, documentation and poor judgment</td>
<td>Providing care outside of the scope of nursing practice</td>
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<td>Evidence of cognitive defects/mental health issues</td>
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The following are some questions to consider when determining if you need to take action:

- Have you witnessed the health professional practicing in a manner that you consider to be incompetent or non-compassionate?
- Has the professional practiced in a manner inconsistent with their Standards of Practice, Code of Ethics, or organizational policies?
- Are clients being put at risk as a result of the actions of the professional?
- Is the professional unwilling or unable to change his/her behaviour?

If you have answered ‘yes’ to any of the above-mentioned questions, you must take the appropriate action.

If you have further questions about the behaviour in question you may contact a professional practice consultant at CRNNS regarding your concerns and potential courses of action. All communications will be confidential in nature. Your manager or supervisor may be a good resource for you at this point as well.

**What is the prudent course of action?**

The timing of your action depends on whether the client is in immediate or potential risk of harm. If the situation shows immediate risk, you may need to intervene immediately and report your concern to CRNNS (or other regulatory body). CRNNS has a problem-solving, decision-making framework that has been designed to assist RNs resolve professional practice issues, available by accessing the following link crnns.ca/supporting-your-practice/resolving-professional-practice-issues/.

CRNNS also has consultants available to discuss any concerns you may have. In addition to supporting your questions concerning the practice of another health professional, if required, they will support you throughout the formal complaint process as well.

There are different courses of action you can take to address your concerns but it is important to remember to be professional, objective, factual and specific.

Your options are to:

- discuss your concerns directly with the health professional,
- report to your manager,
- contact the regulatory body directly.

1 A professional practice issue is any concern or situation that either compromises client care by placing a client at risk or affect an RN’s ability to provide care consistent with the Standards and Code of Ethics.
You may feel it is most appropriate to discuss your concerns directly with the health professional. These conversations are not always easy, but as professionals, you have a duty — and the authority — to engage in them.

If you are unable to have this conversation with your colleague, or you have and the behaviour continues, you should speak with your manager or supervisor about your concerns. You must document your concerns in writing and request a response in a reasonable time frame. Due to the health professional’s right to privacy, your manager may not be able to discuss the outcomes of the meeting or action plans with you. If after contacting your manager you still have reasonable grounds to believe the behaviour is unchanged, you must to take your concerns to CRNNS (Code of Ethics, 2008). Ideally, it would be best to inform your manager of the decision to involve CRNNS as well. If at any point during the above process you believe there is an imminent risk to client safety you must contact CRNNS immediately.

**Documenting the Concern (with employer)**

Each organization should have a formal process in place for reporting behaviours of concern. To assist you in reporting your concerns to your employer, you should consider the following:

- Report the situation to the appropriate manager/director using the established chain of authority in the workplace, while maintaining confidentiality.

- When reporting to your manager, document your concerns in writing, including dates, times, and a description of the behaviour that was witnessed. Indicate how the behaviour violates specific standards of practice, code of ethics, or organizational policies. If the concern is brought to you by a client or family member, inform them that you are required to bring the concern forward to the appropriate individual or regulatory body. To ensure that the manager can investigate your concerns while maintaining patient confidentiality, use client initials and room numbers instead of names, for patient specific issues. It is very important that the patient can be identified for the purpose of investigation.

- Detailed documentation of the professional practice concern should not be included in the client record (only client care and client condition are documented in the record e.g. care provided, assessment and outcomes).

**Making a Report to CRNNS**

When you are making a report to CRNNS a Professional Conduct Consultant is available to answer any questions you may have and to help you determine the appropriate course of action. You must submit your concern to CRNNS in writing and will find guidelines to assist you in documenting your concerns on CRNNS website [crnns.ca/complaints-and-concerns/how-to-submit-a-complaint/](http://crnns.ca/complaints-and-concerns/how-to-submit-a-complaint/). Please also visit [crnns.ca/complaints-and-concerns/our-investigative-process/](http://crnns.ca/complaints-and-concerns/our-investigative-process/) to help understand the process that occurs when a complaint is received.

**Making a Report to other Professional Regulator**

If the situation of concern involves a member of another discipline, the RN should contact the appropriate regulatory body for that profession, (e.g. College of Licensed Practical Nurses of Nova Scotia, College of Physician and Surgeons of Nova Scotia, Nova Scotia College of Pharmacy, etc.). The appropriate contact information will be found on the respective website (RN Act, 2006).

There may also be a legal obligation to report to an external authority such as law enforcement and/or relevant provincial or federal legislation (e.g. reporting child abuse in accordance with the Children and Family Services Act; reporting an adult in need of protection in accordance with the Adult Protection Act, etc.).

**Understanding the Obligations of Others**

Every employer or agency that procures employment for a registered nurse must notify CRNNS if an RN has been terminated or if the RN has resigned because of allegations of professional misconduct, conduct unbecoming the profession, incompetence or incapacity. (RN Act, 2006).
Conclusion

As a self regulated profession RNs have both a legal and ethical duty to report to CRNNS the practice of a colleague that is unsafe, incompetent, non-compassionate or unethical. This accountability also applies to employers when they are aware of such nursing practice or unprofessional behaviour. This practice guideline outlines the steps that RNs and employers should follow when such care is witnessed and summarizes the type of support made available by CRNNS.

References


