



College of
Registered Nurses
of Manitoba

Self-Employed Practice Handbook

A handbook to guide self-employed RNs in Manitoba

Contents:

- Introduction
 - What does self-employed mean?
 - Are you self-employed?
 - Scope of Practice
 - Responsibilities of Self-Employed RNs
- Client Requirements under the RHPA
 - Accepting Clients
 - Refusing Clients
 - Notifying Costs to Clients
 - Ending a Therapeutic Relationship
 - Health Professions Incorporation
 - Change in Practice
- Documentation and Recording Keeping
 - Demonstrating the Nursing Process
 - Keeping Client Records
 - Storing Records and Supplies
 - Providing Care in Facilities
- Other Requirements
 - Quality Improvement and Risk Management
 - Tracking Practice Hours
 - Certification
 - Conclusion

Introduction

In this handbook, we'll review the practice expectations of a self-employed registered nurse. This information is helpful if you're currently a self-employed RN or are thinking about becoming self-employed.

It's important to note that governments do not reimburse RNs or RN(NP)s through provincial health insurance plans. This means most self-employed RNs are paid directly by their clients or their private insurance. We recommend you seek the advice of an accountant or other financial consultant as you set up your self-employed practice.

For the purposes of this handbook, RN also refers to RN(NP).

What does self-employed mean?

RNs may be an employee or practise as a self-employed individual. In legal terms, a self-employed individual is known as an "independent contractor".

Many RNs have become independent contractors who provide services such as operating a foot care business, supporting community development in rural and remote areas or becoming independent consultants for a variety of companies that have health-care needs.

Marketing and advertising: *strategies such as business cards, brochures and media advertising may be used provided the service is represented clearly. We recommended you seek legal and financial advice on registering the name of your business, licensing requirements, etc. [Click here to read our Guidelines for Advertising.](#)*

Are you self-employed?

To help identify if you are a self-employed individual, ask yourself these questions:

- Do you own the business or practice you're claiming RN practice hours from?
- Are you financially invested in the business you're claiming RN practice hours from?
- Do you profit from the business and/or are you at risk of personal financial loss?
- Do you control the business activities?
- Do you hire your own employees?
- Do you submit invoices for services you provide?

If you answered yes to most of these questions, you are most likely be self-employed.

If you work for a nursing agency, you are not self-employed. Instead, you are an employee of the agency.

The amount of control an RN has is a good way to determine if they are employees or a self-employed individual. A nursing employer has the power to exercise control over an employee. However, RNs have nursing education, skill and awareness of personal accountability and this means they may require little, if any, direction and control of their daily practice (CNPS).

Scope of Practice

Scope of practice refers to the range of activities that RNs are both educated and authorized to perform. You can find the legal authority for RN scope of practice in the Manitoba regulations.

In your self-employed practice, consider how you define your role and think about how your registered nursing knowledge and skill has prepared you for self-employed practice.

The *Practice of Registered Nursing Regulation* defines RN scope of practice as the application of registered nursing skill, knowledge and judgment in order to:

1. assist individuals, families, groups, communities, and populations to achieve, maintain and restore their optimal physical, emotional, mental, spiritual and social health;
2. assess, diagnose, plan and provide treatment and interventions and evaluate their effectiveness and to make referrals;
3. teach, counsel and advocate on behalf of their clients in order to enhance health and well-being;
4. coordinate, supervise, monitor, deliver and evaluate the provision of health care;
5. manage, administer and develop systems related to registered nursing and the provision of other health care;
6. teach registered nursing theory and practice; and
7. engage in research related to health or the practice of registered nursing.

Responsibilities of Self-Employed RNs

A self-employed RN must:

- practise within the boundaries established by legislative, regulatory, business, ethical and professional standards,
- have a written description of their nursing practice that aligns with their knowledge, skills and experience,
- have written policy statements appropriate for their practice,
- acknowledge limitations in knowledge, skill and judgment, and
- ensure they have and maintain their competence to practise through ongoing learning and by evaluating their practice.

Client Requirements under the RHPA

Accepting Clients

The Regulated Health Professions Act (RHPA) sets out specific requirements for clients of self-employed RNs.

Accepting or refusing a client must be based on your ability to provide safe, competent care based on the client's health-care needs.

To meet these aspects of care, you must determine if the care required is within your scope of practice. That is, you have the knowledge, skill and judgment required to provide care for the client. An example of this would be providing foot care as part of a client's overall health-care needs. If a client requests in writing that you are willing to take them on as a client, you must provide this.

In special or exceptional circumstances, you can accept a client who has aspects of care beyond your scope of practice if you have a plan to collaborate with other health-care providers to meet the client's needs. For example, a RN(NP) may accept a client in a rural community who has complex health needs (some of which require collaboration with other specialists) to minimize travel for the client.

Self-employed RNs have a legal and ethical responsibility to obtain informed consent from clients for any registered nursing services.

Refusing Clients

There is a difference between refusing clients because the care required is beyond your scope of practice and refusing because the complexity will be time consuming. Refusing because the time spent with clients is time consuming does not uphold the principles of justice.

You cannot refuse to enter into a therapeutic relationship because a client's health issues are complex, because there will be a lot of documentation required or because caring for the client will take longer than usual. However, you should refuse clients if the care they require is beyond your competence or scope.

Clients have a right to know why they are refused care; however, you need to consider if revealing this information will threaten the mental or physical safety of them or others.

Notifying Costs to Clients

You must notify clients or their representative in advance if there will be a cost associated with the nursing services you provide. For example, a RN who has been asked to provide foot care is required to advise how much it will cost before providing the service.

Ending a Therapeutic Relationship

When accepting clients into your practice, it's important to outline the expectations from both the client and RN perspective. Clients who accept RNs into their home for care may interpret this as a social visit, making it difficult to maintain professional boundaries. Outlining expectations of the therapeutic nurse-client relationship may help mitigate any potential conflicts.

If you end a therapeutic relationship, you will need to notify the client or their representative, have reasonable grounds for doing so and document these reasons on the client record. You can end a professional relationship if:

- a client poses a risk to other clients, staff or yourself,
- a client is abusive to you or others,
- a client does not respect professional boundaries or acts inappropriately, or
- you need to leave the practice urgently because of illness or urgent circumstances.

Health Professions Incorporation

Self-employed RNs are permitted to establish a health profession corporation. More information about the application process is available on our website.

Change in Practice

We understand that as a self-employed RN your practice may change. In these cases, you'll need to provide your clients and the College with written notice of the following:

- Your intention to close your practice
- If you're relocating your practice
- If you're taking a leave of absence
- If you'll no longer be practising in Manitoba
- where client records are located and how copies can be obtained or transferred to another health-care provider

If a client or their representative requests a transfer of records to another health-care provider, you'll need to complete it no later than 30 days after you receive the request.

Documentation and Record Keeping

Demonstrating the Nursing Process

Documentation and record keeping is a vital part of registered nursing practice.

Documentation is any written or electronic information about the client that describes the status, care or services provided to that client. It's an essential way for you to demonstrate the nursing process and communicate your observations, decisions, actions and client outcomes.

Regardless of what format you use to document, documentation and the client record are formal, legal documents that provide details about a client's health-care and progress.

Keeping Client Records

Adult client records must be retained for 10 years past the last entry on the record. If the client is a minor, the records must be retained for 10 years after the minor turns 18 years old.

Storing Records and Supplies

If your self-employed practice changes, you must ensure you securely store client records during this time and destroy them when appropriate. This is in accordance with *The Personal Health Information Act (PHIA)*.

You must also provide the College with a copy of the written notice you sent to clients, who else received the notice and information on how you plan to safely store records.

Any supplies such as medications, laboratory specimens, equipment and supplies required for your nursing practice must be safely disposed of.

Manitoba Health, Healthy Living and Seniors (MHLS) has developed three PHIA online training programs primarily for private practitioners and their staff. MHLS has also developed a list of the policies and procedures required by trustees, including health professionals in private practice, to comply with PHIA. View them at www.gov.mb.ca.

Providing Care in Facilities

If you go into facilities to provide direct care (e.g. foot care) you will need to think about how you will document. Prior to going into a facility, consider:

- Do you have permission from the client and facility to access the client's existing health-care record? Remember, the facility owns that record.
- Does the facility know you are there? How will you notify them?
- What are the facility's policies on providing private care for their clients?
- Have you signed a confidentiality form?
- If you document on the client file, how do you maintain records for your own practice? What are your options?

Other Requirements

Quality Improvement and Risk Management

It's important to think about risk management and quality improvement in your self-employed practice. Some strategies for maintaining quality of practice include:

- developing and following policies and procedures related to nursing practice
- reviewing and revising policies and procedures related to nursing practice
- measuring client care outcomes
- regularly gathering feedback from clients
- consulting with peers and role models
- maintaining a comprehensive information management system
- knowing and following any laws related to your business

As a self-employed RN, you need to make sure you are always evaluating your practice so that you can provide safe and effective care.

Tracking Practice Hours

Remember that you'll need to keep track of your registered nursing practice hours and determine a way to have them verified with an independent third party in the event we ask you to verify your practice hours.

An independent third party could be an accountant, lawyer, tax specialist or designated person in authority (but cannot be a family member).

Certification

You may be wondering if you can use "certification" in your designation. In order to present an accurate image to the public, we first need to understand what certification means.

In order to be certified, the following criteria need to be met:

- a national or international board or association oversees the certification program,
- an applicant demonstrates the competencies required by the national or international board or association,
- the applicant has formally demonstrated their competencies (e.g. by taking an exam), and
- the applicant maintains their competence through formal methods (e.g. re-examination or developing a portfolio every few years).

Without these criteria, you cannot use the term "certified" in your designation (e.g. certified foot care nurse or CFCN). Of course, in this example, it is still acceptable to describe your role as "foot care nurse".

Conclusion

This handbook provides a snapshot of the practice expectations for self-employed RNs in Manitoba.

If you have questions about self-employed practice, you can reach out to our practice and standards consultants at practice@crnm.mb.ca. More information is also available on our website.

Questions?

Practice and Standards

204-774-3477 ext. 301

1-800-665-2027 ext. 301

practice@crnm.mb.ca