



College of  
Registered Nurses  
of Manitoba

# Fitness To Practice

## Purpose

The College of Registered Nurses of Manitoba (the College) has the legislated mandate to govern its registrants in a manner that serves and protects the public interest. *The College of Registered Nurses of Manitoba General Regulation, section (4.2(1))* states that a registrant may engage in the practice of registered nursing, only if fit to do so.

Application of nursing knowledge, skill, and judgment requires a level of physical, and psychological fitness which can be impacted by a variety of factors. Fitness to practice is a registration requirement because a registrant who is practicing while unfit poses a risk to the public. To mitigate that risk, the Practice Direction: Practice Expectations for RNs, and the Practice Direction: Self-Disclosure include specific responsibilities registrants have related to self-assessment, monitoring, and management of concerns related to fitness to practice, as well as specific requirements about self-disclosure of health concerns to the College. This document provides information about registrants' responsibilities regarding the fitness to practice requirement and provides direction about how they can meet this expectation.

## Meaning

Fitness to practice means that registrants possess the physical and psychological (emotional, behavioural, and cognitive) capacity to practice safely and competently, in their nursing practice role.

Consideration of fitness to practice must acknowledge the following:

- Fitness to practice includes freedom from dependence on alcohol or drugs.
- Fitness to practice may be impacted by treatment a registrant receives for an illness, condition, or addiction.
- Fitness to practice can fluctuate over time, so self-assessment should be conducted regularly, frequently, and before and during any scheduled practice.

## RN Responsibilities and Expectations

The [Practice Direction: Practice Expectations for RNs](#), and the [Practice Direction: Self Disclosure](#) outline a registrant's accountabilities with respect to their fitness to practice. Together, these documents describe the following expectations:

- Maintenance of fitness to practice;
- Self-assessment of fitness to practice;
- Withdrawal from practice if unfit; and
- Self-disclosure to the College.

Each of these four responsibilities will be discussed separately.

## 1. Maintenance of Fitness to Practice

Registrants must take personal responsibility for their fitness to practice. This means they are expected to make reasonable efforts to ensure they are physically and psychologically fit, prior to, and while engaging in, nursing practice.

The following list provides examples of actions registrants can take to maintain their fitness to practice:

- Abstaining from substances which could impair fitness to practice;
- Communicating to teams and supervisors about how they can provide support to them;
- Using any required assistive devices (for example, hearing aids or glasses);
- Complying with work-related restrictions recommended by their care team; and/or
- Contributing to supportive quality practice environments.

## 2. Self-Assessment of Fitness to Practice

Efforts to maintain fitness to practice can be affected by certain health conditions and personal and professional stressors. Taking personal responsibility for fitness to practice means performing regular self-assessments. Registrants must frequently and regularly self-assess their physical and psychological well-being for any impact on their ability to practice safely and effectively.

Self-assessment includes the ability to meet practice expectations, as well as reflection on the ability to meet the specific requirements of their nursing role or position. It should also include a self-assessment of their ability to meet all their practice expectations.

The following list provides examples of physical and psychological elements to consider when conducting a fitness to practice assessment:

Physical Elements	Psychological Elements
<u>Psychomotor skills</u> For example, coordination, reactivity, dexterity, and speed.	<u>Cognitive</u> For example, focus, memory, calculation, abstraction, learning, verbal and non-verbal comprehension, and the ability to multi-task.
<u>Perception</u> For example the ability to see, hear, feel, smell.	<u>Affective</u> For example, the ability to maintain sufficient composure so as not to impede safe nursing care.
Endurance and stamina	<u>Interpersonal</u> For example, the ability to manage conflict, give and receive constructive feedback, manage therapeutic relationships, and support clients and team members.
Strength	
<u>Pain</u> The ability to manage pain effectively. If pain medications are required, they must not impair ability to perform duties or practice safely.	

Sometimes, a registrant's ability to self-assess may be impacted by a health concern (illness, condition, or addiction). For this reason, when conducting a self-assessment of their own fitness to practice, registrants must incorporate feedback they have received from colleagues, care providers, family, and friends. This may include:

- Feedback from supervisors about performance which may indicate a fitness-to-practice concern;
- Feedback from colleagues or friends about their physical and psychological well-being, which may impact their ability to practice;
- Advice and guidance from their care providers (for example, primary care providers or counsellors). This

is especially important when a registrant's care provider or team has advised them to change their practice or stop practicing due to a health concern.

### 3. Withdrawal from Practice if Unfit

Registrants must only engage in the practice of registered nursing if they are fit to do so. When a registrant suspects that they are unfit to practice, they are required to safely and promptly remove themselves from practice. Withdrawal from practice may include one or more of the following:

- Informing their practice setting that they will be unable to report for duty on a specific date(s), and cooperating with their employer to the best of their ability;
- Taking a leave of absence from their position;
- Resigning or retiring from their position;
- Requesting to cancel their certificate of practice (pursuant to *RHPA s. 51(a)*) or offering to voluntarily surrender their certificate of practice (pursuant to *RHPA s. 102(1)e*); and/or
- Closing or suspending their self-employed practice, in accordance with the [Practice Direction: Self Employed Practice](#).

Registrants should follow the [Duty to Provide Care](#) support document about what is required when removing themselves from practice.

**Important Note:** When a registrant removes themselves from practice, it does not relieve them of their duty to self-disclose to the College.

### 4. Self-Disclosure to the College

As outlined in the [Practice Direction: Self-Disclosure](#), registrants must promptly notify the College, in writing, of a physical or mental condition, including an addiction, which may impair their ability to engage in the practice of registered nursing in a safe and effective manner.

In accordance with [College Policy AA-3](#), the information provided by the registrant will be assessed to determine if the registrant meets the requirements to hold a certificate of practice.

Prompt self-disclosure allows the College to work with the registrant to protect the public. Any personal health information provided as part of the self-disclosure will be managed in compliance with *section 140(2) of the Regulated Health Professions Act*.

Important Note: Registrants are accountable to the [Practice Direction: Self-Disclosure](#) at all times and therefore must not wait until annual registration renewal to make their self-disclosure.

#### Other Resources

While this guidance document has outlined a registrant's accountabilities regarding their own fitness to practice, with respect to any potential concerns regarding a colleague or coworker's fitness to practice, resource documents that can assist include: [Registered Nurse Responsibilities Related to Professional Practice Issues, Duty to Report](#).

#### References

College of Registered Nurses of Manitoba. (2023, September). Policy AA-3: Disclosure of a Condition or Disorder. <https://www.crnmb.ca/wp-content/uploads/2022/01/AA-3-Disclosure-of-a-Condition-or-Disorder.pdf>

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