



Independent Practice: Guideline for Registered Psychiatric Nurses

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CRPNS
COLLEGE OF
REGISTERED PSYCHIATRIC NURSES
OF SASKATCHEWAN

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This document was adapted from the Guideline for Self-Employed Practice developed through a collaboration of the Regulated Psychiatric Nurse Regulators of Canada (RPNRC), an umbrella organization representing the Registered Psychiatric Nurses regulators in Canada. Members of RPNRC include the British Columbia College of Nurses and Midwives (BCCNM), College of Registered Psychiatric Nurses of Alberta (CRPNA), College of Registered Psychiatric Nurses of Saskatchewan (CRPNS), College of Registered Psychiatric Nurses of Manitoba (CRPNM), College and Association of Nurses of the Northwest Territories and Nunavut (CANNN), College of Registered Nurses and Midwives Prince Edward Island (CRNMPEI), College of Registered Nurses of Newfoundland and Labrador (CRNNL), and Nova Scotia College of Nursing (NSCN).

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PURPOSE

The purpose of this document is to outline the professional responsibilities and accountabilities of Registered Psychiatric Nurses (RPNs) in relation to independent practice, ensuring a clear understanding of regulatory expectations, adherence to best practices, and a strong emphasis on incorporating client safety and risk management initiatives when entering this type of practice.

OVERVIEW

RPNs self-employed in independent practice (also referred to as self-employed, private practice, contract and consultant work) provide psychiatric nursing services within their legislated scope of practice and personal competence.

RPNs in independent practice enhance access to health care services in Saskatchewan by applying their psychiatric nursing expertise in the delivery of client care. An RPN in independent practice may provide care within a variety of arrangements, including independently, in collaboration with other healthcare professionals, or by hiring and managing other healthcare providers (CNPS, 2021). An RPN working independently can also sign contracts with a business or organization as an independent contractor. An independent contractor may share many or all the responsibilities of an independent practice RPN, depending on the contract. It is the responsibility of the RPN to understand the nature of the working relationship to which they have agreed and manage contractual requirements in accordance with legal and regulatory requirements.

Under The Registered Psychiatric Nurses Act, the College of Registered Psychiatric Nurses of Saskatchewan (CRPNS) has the authority to govern its registrants. The CRPNS does not regulate clinics or private businesses. The CRPNS regulates the individual RPNs who practice within those settings. When an RPN engages in independent practice, they are accountable for ensuring that the clinic or practice setting meets all requirements necessary for the safe delivery of patient care. The RPN in independent practice assumes many of the responsibilities typically held by an employer. Therefore, the RPN is accountable for establishing policies and procedures that guide and support the safe and effective delivery of practice.

Examples of independent practice include:

- health promotion and prevention services related to health education and risk screening
- case management services, including assessment and care planning
- curative, restorative or palliative care services such as home care, foot care, smoking cessation
- individual or family-based counselling or psychotherapy
- group based education or therapy services
- serving as a consultant to agencies on health care related issues

RESPONSIBILITIES

All RPNs are accountable to comply with the CRPNS's Standards of Psychiatric Nursing Practice, Code of Ethics, Entry-level Competencies, Bylaws, and all other regulatory guidelines and documents, as well as applicable municipal, provincial, and federal legislation.

The RPN in independent practice must:

- have an active license to practice with the CRPNS;
- provide services that meet the definition of psychiatric nursing for those hours to count towards practice hour requirements, as specified within CRPNS Bylaws;
- only provide care that is within their professional scope of practice and personal competence;
- have obtained adequate preparation and additional education when performing high risk activities, such as those classified as beyond entry-level competencies (BELC);
- have adequate experience and sufficient opportunity to have consolidated knowledge and skills prior to beginning;
- develop and maintain comprehensive policies and procedures that clearly outline the safe and effective delivery of the services they provide;
- utilize the nursing process to implement current evidence-based practice and knowledge
- implement quality improvement and risk management strategies for maintaining safe, quality practice; and
- ensure they are practicing within all healthcare, privacy, liability, and business legislation and professional requirements.

RPNs in independent practice are responsible to ensure that all aspects of professional practice, liability, and risk management are properly addressed.

INDEPENDENT PRACTICE REPORTING FORM

Prior to initiating an independent practice, the RPN is required to complete a **CRPNS Notification of Independent Practice Form (Appendix A)**. This form notifies the CRPNS about the RPN's independent practice, including the services they wish to provide, the population they will serve, and the competencies they possess, in their selected area of practice. The form must be kept up to date and resubmitted to CRPNS annually at time of license renewal, or immediately if any details of the independent practice change, including if there is a change or addition to their location of practice, change in the focus of their practice, or if there is a termination of independent practice.

SCOPE OF PRACTICE

RPNs in independent practice provide psychiatric nursing services based on the requisite knowledge, experience, judgement, skills, and resources they have obtained to deliver safe, effective, and competent care. RPNs practice within the boundaries of the RPN scope of practice based on the definition of Psychiatric Nursing Practice and the foundational education they have obtained, as well as individual competence, skill level, and the physical practice setting (CRPNS, 2025a).

“Psychiatric Nursing Practice” means, the application of psychiatric nursing knowledge, skill and judgement:

- a. to coordinate and provide physical and mental health care through utilization of the nursing process;
- b. to promote, prevent, restore and maintain health, with a focus on minimizing the effects of mental illness and developmental challenges, psychosocial, mental, or emotional disorders, or conditions, and associated or comorbid physiological conditions; and
- c. in the domains of direct care, education, administration, policy development, and research.

(CRPNS, 2024a)

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RPNS must practice within all applicable legislative, regulatory, business, ethical, and professional standards. RPNs are expected to be familiar with and apply the principles outlined in the [CRPNS Scope of Practice Guideline](#).

An RPN in independent practice must accept only clients whose identified care needs fall within the RPN's professional scope of practice and individual competence. If needs emerge throughout the provision of service that are out of the RPN scope of practice or competence, the RPN must consult or refer the client to a health care provider who can provide the required services.

The CRPNS recognizes that RPNs are able to expand upon the foundational education they receive in their psychiatric nursing education program and provide care that is deemed as a Beyond Entry Level Competency (BELC). BELCs involve additional education and are implemented only when it benefits the client, in accordance with established policies and procedures. Additional education refers to a course, program of study, training, or other process that provides an RPN with the knowledge, skills, and judgment to perform the BELC. The focus of the additional education is to support safe, competent, client-centered psychiatric nursing care (CRPNS, 2024b). RPNs are expected to be familiar with and apply the principles outlined in the [CRPNS BELC Guideline](#).

To maintain standards of care within their independent practice, the RPN must have provisions for continuing education and continued competence development in their area(s) of practice. It is the responsibility of every RPN to acquire and maintain the knowledge and skills required to address gaps in their practice and to stay current within their scope of practice, ensuring they can effectively fulfill their role and responsibilities related to the services being offered (CRPNS, 2025a).

It is not within the mandate of the CRPNS to assess and approve post basic entry to the profession education. Therefore, it is the RPN's responsibility to ensure that any education and training they pursue provides them with the necessary theory, knowledge, skills, and judgment to competently and safely perform the specific skill being provided.

EXPERIENCE

Experience is essential for developing a competent and reflective practice, refining clinical reasoning and evidence-based interventions using the nursing process, and deepening understanding of complex client care situations including risks and ethical considerations. After completing their foundational education, nurses generally require an additional two to three years of practice experience to consolidate theoretical knowledge into competent, real-world critical thinking and decision-making (Benner, 1984; Missen et al., 2016; Kaihlanen et al., 2020). During this time, RPNs gain the necessary experience through mentorship, collaboration, direct care and exposure to a variety of patient conditions to progress beyond novice practice. RPNs entering independent practice must possess the required competence to safely provide care.

SERVICE DELIVERY

There are two distinct components to independent psychiatric nursing practice: **business management and service delivery**.

Business management includes the organization and operation of a business and the financial structures which support the delivery of the psychiatric nursing services. It is recommended that RPNs in independent practice consult a business lawyer and/or accountant regarding business and financial requirements (CNPS, 2021).

Service delivery encompasses the structures and processes that focus on how care remains safe, ethical, and consistently high in quality, with particular attention to risk management and professional standards. A service delivery plan is a well-thought-out framework that guides how services are organized, delivered, monitored, and continuously improved within the RPN's independent practice and includes development of policy and procedures.

The RPN in independent practice is responsible to develop a robust service delivery plan that clearly articulates their role(s) and all activities related to the psychiatric nursing service being provided. This must include clearly developed policies and procedures that guide psychiatric nursing practice within the selected setting. The service delivery plan must be updated as necessary to reflect changes in practice, client needs, or services provided. RPNs in independent practice must maintain a copy of all their business documentation, including policies and procedures, as well as billing logs that specify the type of service provided, date and time. These records should be readily available, as they may be requested by the CRPNS. Additionally, the CRPNS may request specific policies related to:

- Physician orders and procurement of medications/medical devices
- Informed consent
- Documentation, record keeping, and responsibilities related to being a custodian and/or trustee of a health record
- Conflict of interest
- Referral sources/pathways and collaboration
- Risk management
- Quality improvement and service evaluation
- Termination of independent practice services

An **Independent Practice Checklist** that reviews recommended policy and procedures can be found in **Appendix B**.

ACCOUNTABILITY

RPNs in independent practice are responsible for maintaining accountability across all services provided. Areas requiring meticulous attention are included below.

Risk Management

RPNs must prioritize client safety and manage risks effectively. Independent practice presents additional responsibilities and complexities that can create a higher-risk environment compared to traditional healthcare settings.

Independent practice environments lack support networks traditionally found in employer relationships and within larger healthcare systems. Supports such as formal quality improvement programs, peer consultation, and access to other healthcare providers are not readily available. Therefore, RPNs in independent practice assume increased responsibility for ensuring that proper processes are in place to support quality practice. This responsibility extends to clinical decision-making, client safety, risk management, and the business and administrative management of their practice.

It is essential for independent practice RPNs to have a robust risk management plan in place to ensure they can identify, assess, and mitigate potential hazards and/or risks while maintaining a high standard of care for their clients.

Emergencies and Complications

There must be well-defined policies and specific resources in place for responding to emergent complications within the practice setting. A well-prepared practice setting not only ensures that these policies are in place but also takes a proactive approach to managing emergencies effectively within the environment versus relying solely on public emergency services.

Infection Control

It is the RPN's responsibility to stay informed about evolving infection control practices to minimize the risk of transmission and protect both clients, staff, and themselves from potential infections. This includes, but is not limited to, correctly managing, sanitizing, and disposing of materials and equipment needed for procedures, using personal protective equipment, maintaining a clean environment, as well as ensuring compliance with best practices and manufacturer's instructions for the specific materials and equipment in use (CNO, 2023b).

Referral Pathways

RPNs must be familiar with consultation and referral pathways to ensure ongoing care and support for clients when needed. RPNs must establish clear policies to effectively guide these processes. It is crucial that these pathways align with client-directed goals and well-being, promoting individualized care and recovery that addresses each client's unique needs and preferences.

Collaboration

RPNs must ensure that they have adequate support and resources in place prior to starting in independent practice. This includes access to a support network, which may include mentorship, a community of practice, supervision, or ongoing consultation with an experienced RPN or healthcare provider knowledgeable with the independent practice setting.

Quality Assurance

Ongoing evaluation is vital to ensure clients are receiving safe, competent, and ethical care that meets their needs. RPNs in independent practice must establish quality improvement strategies for monitoring, maintaining or improving the quality of care being provided. This includes but is not limited to:

- Methods for measuring client care outcomes
- Collecting and reviewing feedback from clients to inform quality improvement
- Engagement in the CRPNS Career Long Learning Program and continuous professional development
- Compliance with best practice guidelines and evidence-informed approaches
- Regular review and updating of policies and procedures

Informed Consent

It is expected that each RPN practices according to the principles of informed consent and confidentiality. In independent practice, the RPN often holds sole responsibility for ensuring informed consent is obtained and documented. Informed consent is more than a signature on a form, it is an ongoing communication process between the RPN and the client. Informed consent requires clearly and accurately communicating the nature of the intervention or service, potential risks and benefits, available alternatives, realistic results, and ensuring the client fully understands what to expect and that they may refuse or withdraw consent at any time (Shah et al., 2024).

A thorough understanding and application of informed consent in relation to client competency and capacity is vital. This includes assessing the client's ability to understand and process information, taking into account factors such as age, medical conditions, level of consciousness, and the influence of drugs or other substances (CNPS, 2018).

RPNs are accountable to ensure the client is capable of giving consent and, if not, utilizing the substitute decision maker based on applicable legislation (NSCN, 2022), or denying care.

Confidentiality

The RPN in independent practice demonstrates knowledge and application of confidentiality principles in the therapeutic relationship and manages and stores all information about clients in ways that maintain and safeguard confidentiality and complies with privacy legislation.

Professionally acquired information must be treated as confidential communication. The obligation of confidentiality begins in any situation in which there would be a reasonable expectation of privacy.

RPNs are responsible to:

- Remain up to date on applicable legislation, such as ***The Health Information Protection Act*** (HIPA).
- Maintain knowledge of ethical guidelines related to confidentiality.
- Demonstrate the ability to identify circumstances in which confidentiality may be breached and how these exceptions could apply to their practice context.

Documentation and Records

It is the RPNs responsibility to know how to manage and safeguard client information and records. Records refer to documentation kept about clients, whether on paper, on computer, or by any other means. RPNs in independent practice must be familiar with the implications and responsibility of being a **custodian or trustee of a health record**.

The RPN in independent practice is required to keep accurate and adequate records related to client care. At all times the client files (electronic or hard copy) and pertinent documentation must be appropriately secured and maintained to ensure confidentiality. RPNs are expected to be familiar with and apply the principles outlined in the [Documentation Guideline for Registered Psychiatric Nurses](#).

As the custodian of client information and due to the extended time frame required for record storage, RPNs in independent practice must be familiar with legislation that addresses access, use, disclosure, retention, and destruction of personal health information. For more information the RPN may consider contacting the [Office of the Saskatchewan Information and Privacy Commissioner](#).

Conflict of Interest

A conflict of interest occurs when an RPN's personal, financial, business, political, academic, or familial/friend interests intersect with their professional responsibilities or a client's best interests. RPNs have an ethical duty to recognize, disclose, and address both actual and potential conflicts in their professional relationships, including those related to personal affiliations and financial interests. Communicating the parameters of the therapeutic RPN-client relationship may help mitigate conflicts. RPNs must proactively avoid such conflicts and take immediate action if one arises.

When an RPN works concurrently for an employer and in independent practice, it is important to recognize the potential for conflict of interest and role confusion. The RPN's primary responsibility is to the client, and they must not use their professional position or trust to influence clients for personal gain. RPNs are encouraged to inform their employer of their independent practice and must be familiar with their employer's conflict of interest policies.

Examples of conflicts of interest in independent practice include, but are not limited to:

- Compensation arrangements tied to the volume of services or product provided.
- Office space rental based on revenue generated.
- Paying or receiving referral fees.
- Solicited and unsolicited gratuity for treatment rendered.
- Advertising volume discounts or promotional offers on products or services.

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- Failing to make the client aware of a service fee at onset of the RPN-client relationship.
- Increasing service fees without providing clients with sufficient notice.
- Recruiting clients from an RPN's present or past workplace to their independent practice.
- Providing services to a client personally known to the RPN on a social or familial basis.
- Receiving a benefit from a manufacturer or distributor for endorsing their product.

RPNs must continuously assess whether any interest (personal, financial, or professional) could compromise objectivity, professional integrity, and client trust. Even if no actual conflict exists, the perception of bias can be damaging to the therapeutic relationship and professional credibility.

RPNs are accountable for all aspects of boundary care within the therapeutic relationship and must be knowledgeable in recognizing boundary issues that emerge, including how to address them (CRPNS, 2024c). RPNs are expected to be familiar with and apply the principles outlined in the [*Boundaries in the Therapeutic Relationship: Guideline for RPNs*](#).

A **Conflict of Interest Self-Assessment** is provided in **Appendix C** as a tool to assist the RPN to determine whether they may be in a conflict of interest.

Professional Liability Protection

All RPNs registered with CRPNS have professional liability protection through the [*Canadian Nurses Protective Society*](#) (CNPS).

In addition to professional liability coverage, RPNs must ensure they hold sufficient liability and business insurance for general liabilities associated with their independent practice and in accordance with CRPNS Bylaw requirements.

In addition to consulting with CNPS, it is recommended that RPNs also seek advice from a business lawyer, accountant, and/or business consultant to determine if any additional requirements or protection is recommended based on their specific area of practice.

Advertising

Advertising refers to any communication, oral, written, or electronic, made by or on behalf of the RPN to the public with the purpose of promoting their independent practice and services. The purpose of advertising is to inform and raise awareness about your services, enabling consumers to make informed decisions when choosing a service.

All advertising must be professional, verifiable, ethical, truthful, accurate, and not misleading in any way. It should reflect the RPN's professional designation, qualifications, and scope of practice while also upholding the positive reputation of the psychiatric nursing profession.

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To ensure an accurate representation to the public, CRPNS does not authorize the use of terms such as expert, certified, specialist, or other credentials or designations unless they are supported by valid licensure or granted through a legitimate certification or education program that supports the use of these types of titles. While RPNs are recognized as mental health experts by virtue of their education and licensure as an RPN, the term expert cannot be independently applied to other areas of practice (e.g., expert as a trauma therapist) unless specifically warranted by additional qualifications.

RPNs in independent practice must ensure that all advertising complies with regulatory requirements and guidelines, including all applicable legislation. For example, The [Food and Drug Act](#) prohibits advertising prescription drugs to consumers that include direct or indirect reference to the drug's therapeutic use and/or benefits and specifies that direct-to-consumer marketing of prescription drugs (including Botox) is prohibited beyond name, price, and quantity.

When advertising to the public RPNs are responsible for including:

- a description of services
- their full name and professional title
- qualifications held
- only accurate, factual, evidence based, and verifiable information

Advertising must not include:

- testimonials regarding therapeutic benefits of the service
- financial incentives or discounts for services
- commercial product endorsements
- misleading, sensational claims or guarantees
- videos, before and after treatment photos, pictures alluding to the indications of the drugs
- use of the CRPNS logo
- CRPNS endorsement

RPNs may use a range of products in the context of providing care, such as dressing supplies, books, therapeutic tools or aids, etc. However, recommending or selling client care products can pose a risk of conflict of interest for RPNs. When an RPN endorses a product, it suggests that the product is superior to others. However, RPNs must base recommendations on the individual client's needs rather than making broad product endorsements. RPNs must not recommend or promote unnecessary services to clients.

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RPNs must use their professional judgment to ensure the product being used is:

- evidence based and clinically warranted;
- credibly sourced, procured, and safely stored;
- in the best interest of the client;
- in line with the client's individual needs and choices; and
- provided to the client for the actual cost of the product.

RPNs must avoid:

- using their professional title to endorse, promote or advertise products or services for commercial purposes
- endorsing products or services outside the context of individual clinical care

RPNs are required to follow the [CRPNS Social Media Use Guideline](#). Any social media content that could undermine public confidence in the profession may be subject to review (CRPNS, 2025b).

Termination of Practice

When ending an independent practice, it is essential to ensure clients are provided adequate notice whenever possible and are supported throughout the transition.

RPNs must have a plan for the termination of independent practice as it relates to:

- Current clients of the service, including strategies for referring on to other services and optimizing continuity of care.
- Informing referral sources and professional colleagues.
- Transfer of client files, ensuring appropriate written consent has been obtained .
- Maintenance or secure destruction of client files in accordance with provincial legislation and confidentiality requirements.
- Closure of business accounts and settlement of outstanding fees.
- Catastrophic events, such as death or unforeseen circumstances, ensuring a plan is in place to manage client care and records responsibly.

When an independent practice is terminated, the RPN must inform the CRPNS.

CONCLUSION

Independent practice as a Registered Psychiatric Nurse demands advanced clinical competence, strong understanding of the Standards of Psychiatric Nursing Practice and Code of Ethics, and commitment to professional practice, accountability and risk management. In addition, understanding and implementation of all business and safety requirements is required. The increased autonomy and reduced oversight inherent in independent practice increases the potential for risk to clients and the RPN.

It is required that RPNs stay up to date on changes to legislation, trends and evidenced based practice and legal liability related to independent practice. It is recommended that RPNs review this document regularly. As new information becomes available from the CRPNS, it is the responsibility of the RPN to stay informed and up to date.

Appendix B of this guideline outlines an ***Independent Practice Checklist*** to help RPNs assess their readiness to engage in independent practice. This checklist is not exhaustive and is intended as a guiding tool.

Additional Resource: CRPNS Practice Program

CRPNS offers free, confidential consultation via email or the phone to help registered psychiatric nurses, employers, healthcare providers, the public and others understand psychiatric nursing practice in Saskatchewan. In addition to one-on-one consultation, CRPNS also offers education to teams that may benefit from learning more about a specific area of psychiatric nursing practice.

If you have additional questions or concerns about professional practice requirements or other practice matters, contact CRPNS at info@crpns.ca

APPENDIX A: Notification of Independent Practice Form



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OF SASKATCHEWAN

NOTIFICATION OF INDEPENDENT PRACTICE

***Submit to info@crpns.ca**

Per CRPNS bylaw, RPNs use this form to notify CRPNS about their Independent Practice (IP).

Section 1: Registrant Information

Full Name: _____ Registration Number: _____

Email: _____ Phone Number: _____

Section 2: Practice Information

Establishing a New Practice

Reporting Practice Changes

Annual Licence Renewal

Business/Practice Name: _____

Practice Address: _____

Website: _____

Social Media: _____

Anticipated Start Date: _____

Attach proof of insurance coverage in an amount not less than \$2 million per incident and \$2 million per year against general liability with respect to the operation of the IP as a business.

Section 3: Services Offered

Provide a description of your IP, including services being offered and the client population:

Are you providing in-person, virtual, or hybrid services?

Section 4: Education and Training

List your additional education, training, and certifications demonstrating your competence for this type of IP:

Section 5: Attestation

I confirm that the information provided is accurate and that I understand my obligations as a self-employed RPN to comply with professional standards, privacy legislation, and all other relevant legislation and regulations.

Signature: _____ Date: _____

APPENDIX B: *Independent Practice Checklist*

1. Practice Guidelines and Scope of Practice

- I have thoroughly reviewed the Independent Practice Guideline for Registered Psychiatric Nurses, CRPNS code of ethics, standards of psychiatric nursing practice, and other relevant regulatory documents and guidelines.
- My independent practice business is within the scope of Registered Psychiatric Nursing.
- The services I offer require the specialized knowledge, skills, and judgment of a Registered Psychiatric Nurse.
- The services I offer fall within the definition of Registered Psychiatric Nursing per the CRPNS Bylaws (CRPNS, 2024a) as below:
- The service is evidence-based and aligned with current best practices.
- The services I provide are both effective and beneficial for clients.
- I have defined the client population intended for my services.
- I utilize the steps of the nursing process (assessment, diagnosis, planning, implementation, and evaluation) as an integral part of my independent practice.

2. Competence in Your Chosen Practice Area

- I am competent in the specific area of practice I have chosen for independent practice.
- I have obtained the necessary knowledge, skills, judgment, additional education and experience to meet the standards of psychiatric nursing practice.
- I am competent to perform any Beyond Entry Level Competencies (BELCs) associated with my independent practice and recognized within the psychiatric nursing scope.
- I have a process in place for referrals and support when my clients need services beyond my own competence or capacity.
- I have quality assurance mechanisms in place to evaluate and improve my practice regularly.
- I am able to meet the expectations for responsibility and accountability as outlined in the Standards of Psychiatric Nursing Practice, Code of Ethics, Practice Directions and Guidelines, Entry-level Competencies, and all other relevant legislation.
- I have reviewed all relevant municipal, provincial, and federal legislation applicable to this type of work.

3. Addressing Limitations

Are there any practice expectations or requirements that cannot be met in the services I am providing? If so, how will I address these limitations?

4. Policies, Procedures, and Professional Standards

- I have policies and procedures in place to support my practice and maintain professional standards, including developing a robust risk management plan.
- There is a plan in place for regularly reviewing and updating these policies and procedures.

5. Insurance

- I have confirmed with CNPS and other relevant sources what additional insurance or liability coverage is required beyond my current CNPS coverage.
- I have obtained insurance coverage in an amount not less than \$2 million per incident and \$2 million per year against general liability with respect to the operation of the independent practice as a business and understand my responsibility to maintain this coverage at all times.

6. Notification to CRPNS

- I have submitted my Notification of Independent Practice Form to CRPNS and will resubmit it if any changes occur in my practice, as well as annually at time of license renewal.

ADDITIONAL INFORMATION

1. Additional policies and procedures to establish in independent practice:

Client Care Policies

- Hours of operation, contact information, and location of services
- Roles and responsibilities in care and professional conduct
- Accepting and/or declining new clients
- Booking process and methods of contact
- Intake and assessment procedures
- Informed consent process
- Documentation and record keeping
- Contingency planning and termination of therapeutic relationships
- Termination of independent practice

Collaboration

- Staff collaborators and their roles
- Appropriate referral sources and pathways
- Referral processes for when the client's needs exceed RPN scope or ability
- Professional network of trusted peers/mentors available for consultation or support as needed

Professional Boundaries and Ethics

- Establishing and maintaining professional boundaries
- Handling dual relationships and conflicts of interest
- Ethical decision-making framework

Fees and Financial Policies

- Cost of services offered, including sliding scale or fee adjustments if applicable
- Fee schedule, billing, and payment methods
- Contractual agreements with established agencies for third party reimbursement (e.g. Non-Insured Health Benefits and other insurance providers)
- Cancellation and no-show policies
- Refund policies
- Additional expenses (e.g. materials, assessment tools)
- Applicable bills (e.g. rent, utilities, software, etc.) and taxes

Privacy and Confidentiality

- Client record management and storage that is compliant with applicable legislation, including the responsibilities associated with being a custodian of health care documents
- Collection and sharing of client information
- Limits of confidentiality (mandatory reporting)
- Requests by clients to view health information

Risk Management and Safety

- Managing client emergencies or crises
- Occupational health and safety considerations
- Infection and prevention control measures
- Reporting adverse events
- Strategies to mitigate potential for harm
- Required equipment and supplies
- Other applicable environmental safety considerations

Professional Development

- Continuing education and competence maintenance
- Quality improvement and service evaluation mechanisms
- Strategies to prevent burnout and reduce risks association with exposure to vicarious trauma if applicable
- Advertising and Communication
- Advertising strategy that is in line with regulatory requirements
- Social media and public communications policies

2. Additional Resources

- [Canadian Nurses Protective Society](#)
- [CRPNS Practice Resources](#)
- [Government of Canada – Illegal Marketing of Prescription Drugs](#)
- [Infection Prevention and Control Canada](#)
- [Personal Information Protection and Electronic Documents Act](#)
- [Saskatchewan Health Information Protection Act](#)

APPENDIX C: Conflict of Interest Self-Assessment

If you are unsure if a situation is a conflict of interest, start by asking yourself the following self-reflective questions:

- If someone else found out about this arrangement, would it appear that I'm prioritizing something other than the client's best interest?
- Could my personal relationships or outside interests influence my professional judgment in this situation?
- Do I stand to gain personally from this decision or interaction?
- Would I be comfortable explaining this situation to the regulator or professional colleagues?
- How would this appear to others—could it damage the public's trust in me or the profession?
- Have I disclosed all relevant relationships and interests to the client and documented that appropriately?

Financial Conflicts:

- Am I referring this client to a service from which I benefit financially (e.g., a business I own, a family member's clinic)?
- Am I charging for a service that should be covered elsewhere, or that I'm not authorized to provide?
- Do I have a financial interest that could bias the care options I'm presenting?

Personal or Relational Conflicts:

- Do I have a personal, family, or romantic relationship with this client or someone closely connected to them?
- Am I providing care in a situation where my objectivity may be affected due to past or current personal connections?
- Would continuing this professional relationship risk a dual relationship that could blur boundaries or cause harm?

Dual Role Conflicts:

- Am I in more than one role with this client (e.g., caregiver and landlord, therapist and supervisor, friend and nurse)?
- Could my role with the client place me in a position where I have competing responsibilities or loyalties?
- Am I being asked to do something outside of my professional role because of a personal connection?

It is advised to seek professional assistance and/or consultation with a CRPNS Practice Advisor if it is unclear whether a specific situation constitutes a conflict of interest.

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