

IPNIG Resolution- Evolution of Independent Practice for Support and Acknowledge Registered Nurses and Nurse Practitioners; the need to be recognized and remunerated directly

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Conflict of Interest: ___none___

Whereas: Nursing is a practice discipline recognized as a profession that can self-regulate. Limitations for a number of RNs & NPs who provide nursing services independently exist. It is known that a shared vision for all nursing designations is an unfulfilled goal due to a lack of role clarity, power dynamics, and inconsistent regulations nationally. RNs and NPs face challenges when they offer independent nursing services to the public, as some agencies do not recognize that in Ontario RNs and NPs have the knowledge, skills, and judgment to practice independently and autonomously i.e., without a doctor's order.

Whereas: There has been a steady number of RNs with a slight increase and a steady increase of NPs, that is reported from (CNO, 2015 - 2020) "self-employed" Registered Nurses and Nurse Practitioners in Ontario communities. i.e. primary health, alternative & complementary therapies. As well, there are a large number of full time and part time independent practitioners who provide services to Ontarians, and we need to support them as they manage health conditions and advance their physical, emotional, and spiritual health that are not captured by the CNO or by the RNAO. The College of Nurses of Ontario has developed a standard related to independent practice that acknowledges the evolution of these nursing services.

Whereas: The Independent Practice Nursing Interest Group recognizes the need for resources to conduct independent practice excellence, and enhance remuneration strategies in order to address issues in self-employed settings; such risk management, quality improvement, infection prevention & control, and health informatics, appropriate practice principles, and legal responsibilities. The IPNIG also recognizes the need to expand payment options to government sources and medical insurance programs.

Therefore, be it resolved: RNAO recognizes the contributions of Registered Nurses in Independent Practice, aligning strategic initiatives with College of Nurses, Canadian Nurses Association, and WeRPN (Registered Nurses Association of Ontario) thereby enhancing access for Ontarians. In the current climate this will support Registered Nurses who provide services outside of mainstream health care settings, promotes optimal healthy practices and advances the role of nursing. Nurse Practitioner, Community Nursing, Footcare, Occupational health and Safety, Complementary Therapies including energy work, Cosmetic and Dermatological Care, RN Psychotherapy, RN Coaching, Lactation Consulting, Patient Advocacy, Legal Nurse Consulting, Palliative Care, Parish Nursing, Health and Wellness Consulting, Nurse Consulting, etc.

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Backgrounder

In the last five years 2020 had the largest number of RNs and NPs reporting to the College of Nurses of Ontario that they held one or more self-employed positions (CNO, 2021). There also has been an increased number of requests for assistance to the IPNIG as to how to set up a business or be self - employed as a Registered Nurse. In this metric those RNs and NPs who work full time and only practice independently part time may not be captured.

Despite this increase and the increased interest, there are limited educational resources available for independently practicing nurses to make reference to. While there is a CNO Practice Guideline for Independent Practice, it is very broad in scope and provides limited direction on how to start the process and the full scope of legal and business requirements (CNO, 2019). On a search of the Canadian Association of Schools of Nursing resources and guidelines there are none that pertain specifically to independent nursing practice (CASN, 2021). Upon search of the RNAO policy library, no resources specific to independent practice were found (RNAO, 2021).

Nursing is a discipline that has its own theories, knowledge base, ethical guidelines and is recognized as a regulated profession. (RHPA, 1991). Within the scope and standards of practice laid out by the CNO, RNs can practice independently and autonomously. There is a large gap of knowledge to practice. This is evident from an educational and policy point of view. While within our provincial and national organizations there is support for the type nursing activity that can be practiced independently such as complementary therapies, RN psychotherapy, Nurse practitioner and so on. Yet no policy for support exists, there is no educational material available and struggle exists with remuneration strategies as some agencies do not recognize that RNs and NPs can practice independently and autonomously in Ontario. (checked with insurance companies).

Access to the services of RNs and NPs in independent practice would enhance the health care of Ontarians as they provide important services from foot care to RN psychotherapy. The value of having access and a method of remuneration would bring peace of mind to clients, enhance nursing practice and expand nursing knowledge in the future.

It is vital that we create a strategy with respect to policy, education, access, and support remuneration of our hard working independently and autonomously working RNs, NPs, Complementary Therapists, Footcare, RN Psychotherapy, Legal Nurse Consulting, Occupational Health and Safety, Lactation Consultants, Patient Advocates, Parish Nursing, Palliative Care, RN Coaching, Nurse Consulting, Health and Wellness Education and Consulting, Community Nursing and others that may arise on the horizon.

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