Practice Standard





Code of Conduct

THE STANDARD OF CARE.

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VISION

Leading in regulatory excellence

MISSION

Regulating nursing in the public interest

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Our focus at the College of Nurses of Ontario is to protect the public. One way we do this is by setting and enforcing standards of practice for all nurses in Ontario.

This Code of Conduct is a standard of practice describing the accountabilities all Ontario nurses have to the public. It articulates what the people of Ontario can expect and sets the bar for those in the nursing profession.

When we developed this Code, it was important that the public had an opportunity to provide feedback. During our consultations with members of the public we asked, "What do you expect of Ontario nurses?" The consensus was that a nurse should "always provide the same nursing care you would want a loved one to receive."

The Code puts patients at the centre of nursing care. We know it is important that the public has confidence in the care nurses provide. Public safety is our top priority. This Code of Conduct supports nurses to provide patients with the care they expect and deserve.

We hope this Code is meaningful to you. We welcome comments from the public and any questions you have about what you can expect when receiving nursing care.

Anne Coghlan, RN, MScN

Executive Director & CEO

College of Nurses of Ontario

What is the Code of Conduct?

The College of Nurses of Ontario (CNO) upholds safe nursing care for the people of Ontario.

To help do this, we've created a Code of Conduct (Code) to explain the behaviour you, the public, can expect of nurses when receiving health care. All nurses are accountable to this Code.

To develop the Code, we reviewed the most current research about what patients and the public expect of nurses. We also reviewed other documents such as the *Ontario Human Rights Code* and recommendations in the *Truth and Reconciliation Commission Report*. We encourage all nurses to review and consider these documents in their practice. In addition, we consulted with members of the public, nurses, educators, nurse employers, nursing associations, nursing unions and government.

The Code consists of six principles:

- 1. Nurses respect the dignity of patients and treat them as individuals
- 2. Nurses work together to promote patient well-being
- 3. Nurses maintain patients' trust by providing safe and competent care
- 4. Nurses work respectfully with colleagues to best meet patients' needs
- 5. Nurses act with integrity to maintain patients' trust
- 6. Nurses maintain public confidence in the nursing profession.

Each principle is supported by a set of statements. These principles and statements define the values nurses use to fulfil their professional obligations. Throughout the document, we use the word "patient" broadly to include individuals, families, groups, communities and populations.

Nurses are expected to use the Code along with other CNO standards of practice, which provide more detailed guidance for nurses. If nurses fail to meet standards of practice, CNO may take action.

This document is adapted with the permission of the Nursing Council of New Zealand from the Council's Code of Conduct for Nurses (2012). **Bolded** terms are defined in the glossary.



Nurses respect the dignity of patients and treat them as individuals

- Nurses treat **patients** with care and compassion. 1.1
- 1.2 Nurses show respect to patients' **culture**, identity, beliefs, values and goals.
- 1.3 Nurses take steps to maintain patients' privacy and dignity in the physical space where they are receiving care.
- 1.4 Nurses listen and **collaborate** with patients and any person the patients want involved in their care.
- 1.5 Nursing care is not judgmental and is free of discrimination.
- 1.6 Nurses reflect on and address their own practice and values that may affect their nursing care.
- Nurses do not impose their personal beliefs and biases on patients. These include political, religious and cultural beliefs. If they see other health care team members doing this, nurses intervene.
- 1.8 When a nurse's own personal beliefs conflict with a patient's care plan, the nurse provides safe, compassionate and timely care to those patients, until other arrangements are in place.





Nurses work together to promote patient well-being

- 2.1 Nurses provide clear and timely information to patients. Nurses talk to patients in ways patients understand, inviting their feedback.
- 2.2 Nurses strive to meet patients' language and communication needs.
- 2.3 Nurses show respect for patients' rights and involve patients in making care decisions.
- 2.4 Nurses ask for consent from appropriate decision-makers when patients are unable to do so.
- 2.5 Nurses acknowledge patients' right to express concerns. Nurses respond by working with patients to resolve concerns.
- 2.6 Nurses advocate for patients and help them access appropriate health care.
- 2.7 Nurses understand there may be gaps impacting patient care and health outcomes in some communities. They work together with health care teams to address these gaps.
- 2.8 Nursing care is timely. When this is not possible, nurses explain the reasons for this delay to patients.



Nurses maintain patients' trust by providing safe and competent care

- 3.1 Nurses identify themselves, their first name, last name, title and their role to patients.
- 3.2 Nurses use appropriate knowledge, skill and judgment when assessing the health needs of patients.
- 3.3 Nurses respond and are available to patients when working.
- 3.4 Nurses recognize and work within the limits of their knowledge, skill and judgment and their legal scope of practice.
- 3.5 Nurses seek advice and collaborate with the health care team to uphold safe patient care.
- 3.6 Nurses maintain and continually improve their **competence**. They reflect on their practice and set learning goals annually by participating in CNO's **Quality Assurance Program**.
- 3.7 Nurses use accurate sources of information, such as research, to inform their practice.
- 3.8 Nurses maintain complete, accurate and timely documentation in their practice.
- 3.9 Nurses are accountable to, and practice under, relevant laws and CNO's **standards of practice**.



Nurses work respectfully with colleagues to best meet patients' needs

- 4.1 Nurses are professional with **colleagues** and treat them with respect, including on **social media**.
- 4.2 Nurses collaborate and communicate with colleagues in a clear, effective, professional and timely way.
- 4.3 Nurses work together with other health care experts to improve their patients' care.
- 4.4 Nurses support, mentor and teach members of the health care team, including students.
- 4.5 Nurses take action to stop unsafe, incompetent, unethical or unlawful practice, including any type of abuse.

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Nurses act with integrity to maintain patients' trust

- 5.1 Nurses protect the privacy and confidentiality of patients' **personal health information**.
- 5.2 Nurses do not share patient information on social media.
- 5.3 Nurses take prompt action to prevent and protect patients from harm.
- 5.4 Nurses do not accept gifts from patients, unless it harms the professional relationship with patients.
- 5.5 Nurses do not act as powers of attorney or **substitute decision-makers** for patients.
- 5.6 Nurses declare any conflict of interest that could affect their judgment. This includes a nurse's personal, financial or commercial interest.
- 5.7 Nurses maintain integrity. They do not use their position to promote or sell products for **personal gain**.
- 5.8 Nurses maintain professional **boundaries** with patients.
- 5.9 Nurses do not engage in any sexual relationship with patients while caring for them. This law stays in effect for one year after the end of the nurse-patient relationship.



Nurses maintain public confidence in the nursing profession

- Nurses are accountable for their own actions and decisions. 6.1
- 6.2 Nurses respect the property of their patients and employers.
- Nurses clearly communicate to patients the details of care or a service 6.3 they intend to provide.
- Nurses advocate for improving the quality of their practice setting to support safe patient care.
- Nurses have a duty to report any error, behaviour, conduct or system issue 6.5 that affects patient safety.
- 6.6 Nurses do not practice when impaired by any substance.
- Nurses are responsible for maintaining their health. They seek help if their 6.7 health affects their ability to practice safely.

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Code of Conduct Glossary

Boundaries: The points when a relationship changes from professional and therapeutic to unprofessional and personal. Therapeutic nurse-patient relationships put patients' needs first. Crossing a boundary means a nurse is misusing their power and trust in the relationship to meet personal needs, or behaving in an unprofessional manner with the patient. Crossing a boundary can be intentional or unintentional

Collaborate: Work cooperatively together

Colleagues: Nurses, other health care providers and students who are involved in the patient's care

Competence: A nurse's ability to consistently apply the required knowledge, skill and judgment for safe, ethical and effective nursing practice

Culture: Learned values, beliefs, norms and way of life that influence a person's thinking, decisions and actions

Patient: An individual, family, group, community or population receiving care, including, but is not limited to, "clients" or "residents"

Personal gain: Advantage or benefit, financial or otherwise, that a nurse receives. A personal gain can be monetary (cash, gifts and rewards) or provide the nurse other personal advantages. A personal gain includes interests of the nurse's family, charitable causes or organizations the nurse supports. It does not include a nurse's salary or benefits

Personal health information: Any identifying information about patients' physical or mental health, including information about the health history of their family

Quality Assurance Program: A CNO program where nurses demonstrate their commitment to continuing competence and quality improvement of their knowledge, skill and judgment through self-assessment, practice assessment, and peer assessment. CNO's Quality Assurance Program is mandated by the Regulated Health Professions Act, 1991

Social media: Community-based online communication tools (websites and applications) used for interaction, content sharing and collaboration. Types of social media include blogs or microblogs (personal, professional or anonymous), discussion forums, message boards, social networking sites and content sharing websites

Standards of Practice: CNO's expectations for how a competent nurse should perform. Standards of practice contribute to public protection

Substitute decision-maker: Person, identified by the Health Care Consent Act, 1996 who makes a treatment decision for someone who cannot make their own decision



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