

## PRACTICE STANDARD FOR BCCNM NURSES

# Duty to Report

Practice Standards set out requirements related to specific aspects of nurses' practice. They link with other standards, policies and bylaws of the BC College of Nurses and Midwives and all legislation relevant to nursing practice.

Nurses<sup>1</sup> (in all positions and settings) have a legal and ethical obligation to report incompetent or impaired practice or unethical conduct of **regulated health professionals**. It is important for nurses to understand when to report, what to report and how to report, and to know what is legally and ethically required.

In B.C., the *Health Professions Act* establishes a legal duty for nurses to report situations in which there is a good reason to believe that a regulated health professional's practice is impaired or incompetent and may pose a danger to the public (s. 32.2). The *Health Professions Act* also requires nurses to report any **sexual misconduct** by a regulated health professional. If concerns about sexual misconduct are based on information from a client, nurses must first obtain the client's (or substitute decision-maker's) consent before making a report (s. 32.4). The *Health Professions Act* protects a nurse who makes a report in good faith from legal liability in circumstances where the nurse has a legal duty to report under the Act.

Under this practice standard, nurses also have an expanded duty to report situations in which they have reason to believe that a regulated health professional's practice poses a danger to the public because of unethical behaviour or for other reasons.

Nurses may have obligations to report regulated health professionals under other legislation and regulations. The specific legislation or regulation that applies to a nurse's practice depends on the work setting and the nature of the work.

---

<sup>1</sup> "Nurse" refers to all BCCNM nursing registrants, including: licensed practical nurses, nurse practitioners, registered nurses, registered psychiatric nurses, licensed graduate nurses, employed student nurses, and employed student psychiatric nurses.

## Principles

1. Nurses are attentive to signs that a colleague is unable to perform their duties, and they are obligated to take the necessary steps to protect client safety.
2. Nurses report, in writing, to the appropriate regulatory body when they have reason to believe that a regulated health professional is practising when they:
  - a. are suffering from a mental or physical problem, an emotional disturbance, or an addiction to drugs or alcohol that impairs their ability to practise;
  - b. have a pattern of incompetent practice that may pose a danger to the public;
  - c. have behaved unethically in a way that may pose a danger to the public;
  - d. otherwise present a danger to the public.
3. Nurses report, in writing, to the appropriate regulatory body if they believe that a regulated health professional has engaged in sexual misconduct.
4. If concerns about sexual misconduct are based on information from a client, nurses must first obtain the client's (or substitute decision-maker's) consent before making a report.
5. Nurses may have additional employment obligations to report any unprofessional conduct to their supervisor/employer and should also follow applicable employment policies. If no report has been made by the supervisor or employer, the nurse must make a direct report to the regulatory body.
6. Nurses working as employers, managers or business partners or associates of regulated health professionals report, in writing, to the appropriate regulatory body when they take any of the following actions against a regulated health professional based on a belief that their continued practice may pose a danger to the public because they are not competent to practise, or because their practise is impaired by a mental or physical problem, emotional disturbance, or an addiction to drugs or alcohol:<sup>2</sup>
  - a. terminating the regulated health professional's employment;
  - b. revoking, suspending or imposing restrictions on the regulated health professional's privileges; or
  - c. dissolving a partnership or association with the regulated health professional
7. Nurses have a legal duty to report to BCCNM when they have been charged with or convicted of a criminal offence identified by legislation as relevant to working with children or vulnerable adults. Nurses working as employers also have a legal duty to notify the appropriate regulatory body when they become aware that an employee who is a regulated

---

<sup>2</sup> This duty to report also applies if a nurse intends to take such action but the regulated health professional resigns, relinquishes their privileges, or dissolves their partnership or association before the nurse acts.

health professional has been charged with or convicted of such an offence (*Criminal Records Review Act*, ss. 12 and 17).

## Applying the principles to practice

1. If you suspect incompetent or impaired practice or unethical conduct, consider:
  - a. Is the regulated health professional failing to provide safe, competent and ethical care?
  - b. Does the behaviour fail to meet the standards of practice or standards for professional ethics?
  - c. Has there been a pattern of questionable behaviour?
  - d. Is the regulated health professional unable, or unwilling, to recognize and correct the behaviour?
  - e. Have clients been harmed by this behaviour?
  - f. Are clients likely to be harmed in future?
2. Take action if you answer 'yes' to any of the questions above. Some actions may include:
  - a. Discussing your concerns directly with the regulated health professional;
  - b. Documenting a factual description of your concerns including dates, times and a description of what occurred;
  - c. Reporting to your manager or supervisor;
  - d. Consulting with the appropriate regulatory body.
3. When making a formal complaint:
  - a. Contact the appropriate regulatory body to determine what information should be included in your written complaint;
  - b. Make your complaint factual; provide details of specific incidents including dates, names and a specific description of what occurred;
  - c. Remember that, unless it is specifically part of your job (i.e., as a manager), it is the regulatory body's job, not yours, to investigate the concern.
4. Nurses have separate duties to report that are governed by other legislation. For more information consult the BCCNM document [Legislation Relevant to Nurses' Practice](#) and speak with your employer or manager.
5. The *Health Professions Act* establishes requirements for consent before making a complaint about alleged sexual misconduct by a regulated health professional, if the complaint is based on information provided by a client (s. 32.4(2)). Also review the BCCNM document [Legislation Relevant to Nurses' Practice](#) for more information.

## Glossary

**Sexual Misconduct:** Sexual misconduct includes professional misconduct involving:

- a. sexual intercourse or other forms of physical sexual relations between a registrant and a client,
- b. touching, of a sexual nature, of a client by a registrant, or
- c. behaviour or remarks of a sexual nature by a registrant towards a client,

but does not include touching, behaviour and remarks by a registrant towards a client that are of a clinical nature appropriate to the service being provided (see BCCNM Bylaws, s. 362(4)).

**Regulated Health Professional:** "Regulated health professional" refers a registrant of BCCNM or any health profession college under the *Health Professions Act*.

## For More Information

- [Consent practice standard](#)
- [Duty to Provide Care practice standard](#)
- [Boundaries in the Nurse-Client Relationship practice standard](#)
- [Legislation Relevant to Nurses' Practice](#)
- [Professional Standards for Licensed Practical Nurses](#)
- [Professional Standards for Registered Nurses and Nurse Practitioners](#)
- [Professional Standards for Registered Psychiatric Nurses](#)
- [Registered Psychiatric Nurses' Code of Ethics](#)
- [Scope of Practice for Licensed Practical Nurses: Standards, Limits and Conditions](#)
- [Scope of Practice for Nurse Practitioners: Standards, Limits and Conditions](#)
- [Scope of Practice for Registered Nurses: Standards, Limits and Conditions](#)
- [Scope of Practice for Registered Psychiatric Nurses: Standards, Limits and Conditions](#)
- Provincial legislation online  
<http://www.bclaws.ca>
- BC Health Regulators' website. (Includes contact information for other B.C. health professions regulatory organizations.)  
<http://bchealthregulators.ca/>

- The B.C. Handbook for Action on Child Abuse and Neglect for Service Providers  
[https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/public-safety/protecting-children/childabusepreventionhandbook\\_serviceprovider.pdf](https://www2.gov.bc.ca/assets/gov/public-safety-and-emergency-services/public-safety/protecting-children/childabusepreventionhandbook_serviceprovider.pdf)
- B.C. Government Professional Regulation web page  
<https://www2.gov.bc.ca/gov/content/health/practitioner-professional-resources/professional-regulation>

For more information on this or any other practice issue, contact BCCNM's Standards Support by completing an [intake form](#).

Copyright © British Columbia College of Nurses and Midwives/November 2020

Effective date: July 22, 2019

900 – 200 Granville St  
Vancouver, BC V6C 1S4  
Canada

[www.bccnm.ca](http://www.bccnm.ca)

Pub. No. 436