



The Nova Scotia College of Nursing (NSCN) is the regulatory body for licensed practical nurses (LPNs), registered nurses (RNs) and nurse practitioners (NPs) in Nova Scotia. Our mandate is to protect the public by promoting the provision of safe, competent, ethical and compassionate nursing services by our registrants. The term nurse in this document refers to LPNs, RNs and NPs unless otherwise stated.

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Our practice support tools are developed using current reference material. The source of this material is available upon request.



This tool is a resource for nurses in all practice settings to help them understand:

- Fitness to practise and incapacity
- The fitness to practise process
- Professional obligations related to incapacity and fitness to practise

Like all regulatory tools, use this document in conjunction with employer policy, applicable legislation and the standards of practice and code of ethics for LPNs, RNs and NPs.

Fitness to Practise

“[Fitness to practise](#)” is defined as having the necessary physical and mental health to provide safe, [competent](#), ethical and [compassionate nursing services](#). Nurses are accountable to monitor and maintain their own fitness to practise and professional conduct as outlined in their code of ethics and [standards of practice](#).

When a physical or mental health condition impacts a nurse’s practice, they are accountable to take appropriate action to correct the situation. Some examples of appropriate action include seeking medical advice, accessing an Employee Assistance Program (EAP) or stopping practice until the condition improves. Some examples of situations where a nurse’s fitness to practise may be impaired include:

- Extreme fatigue or exhaustion
- Illness or injury
- Use of substances such as drugs or alcohol
- Chronic conditions or disorders

Incapacity

[Incapacity](#) means a registrant has or had a medical, physical, mental or emotional condition, disorder or addiction that renders or rendered the registrant unable to practise with competence or that endangers or may have endangered the health or safety of clients. An individual concerned that a nurse may be incapacitated is accountable to notify the nurse’s manager. In certain situations, NSCN should also be notified in writing. For more information, see our [Duty to Report Practice Guideline](#).

Fitness to Practise Process

The fitness to practise process is a non-disciplinary process for nurses experiencing an incapacity. The process typically requires the nurse to be out of practice while receiving health treatment. The goal is to return the nurse to practice once there is evidence to indicate the nurse is fit to practise. A return to nursing practice must be reviewed and accepted by the Fitness to Practise Committee who will consider conditions and restrictions that may be placed on the nurse’s licence.

All nurses must meet specific [eligibility criteria](#) to enter the program.

If the nurse meets the eligibility criteria, the fitness to practise process initiates when:

- NSCN receives a complaint regarding a nurse’s capacity, or
- Concerns are raised regarding a nurse’s incapacity during the complaint process, or
- A nurse self-reports and agrees to enter the process

Points for Employers

As the nurse prepares to return to work, the employer and the nurse should establish a return to work (RTW) plan. A well-developed plan may increase the success of the transition back to practice by supporting the health of the nurse while ensuring client safety. The RTW plan may contain any number of temporary strategies, interventions or practice modifications. The fitness to practise process may include notification to employers about particular conditions and restrictions that have been placed on the nurse's licence.

The RTW plan is developed in collaboration with the appropriate health care professional managing the underlying issue(s).

Key Points

- Nurses are accountable to self-assess their fitness to practise and take the necessary steps to manage any identified issues by seeking care from appropriate providers and implementing recommended treatment plans, which may include removing themselves from practice.
- Nurses have a legal and ethical obligation to report the incompetent, unethical or impaired practice of themselves, another nurse or other health care provider.

Suggested Readings

- [Duty to Report Practice Guideline](#)
- [Nurses Self-Reporting a Criminal Offence Position Statement](#)
- [Problematic Substance Use – A Guide for Nurses](#)
- [Problematic Substance Use – A Guide for Managers](#)

For further information on anything contained within this tool, please contact an NSCN Practice Consultant at practice@nscn.ca.