

Code of Ethics for Nurses



**Decree No. 2016-1605
of 25 November 2016**

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Article L. 4312-1 of the Code of Public Health

(introduced by Act no. 2006-1668 of December 21, 2006)

«A National Order of Nurses (*Ordre national des infirmiers*) is hereby established. All nurses qualified to practice their profession in France, other than those governed by the service regulations for members of the military, must be members of this Order.

The National Order of Nurses ensures that the ethical principles of the profession are maintained and that the expertise required for practice is developed. It is active in promoting public health and the quality of care.

The National Council of the Order must prepare a code of ethics, which is laid down in a Decree by the French Council of State. This code must specifically set out the duties of nurses in their interaction with patients, other members of the profession, and other healthcare providers.»

SECTION 1

General duties

Scope of application

« **Art. R. 4312-1.** - The provisions of this chapter constitute the Code of Ethics for Nurses. All nurses who are entered on the roll of the National Order of Nurses, all nurses performing a professional procedure under the conditions laid down in Article L. 4311-1 et seq., and all nursing students mentioned in Article L. 4311-12 must comply with these provisions.

« Pursuant to Article L. 4312-7, the National Council of the Order of Nurses is responsible for ensuring compliance with these provisions by all nurses who are entered on the roll of the Order.

« Any person violating these provisions may be subject to disciplinary action and may also be liable to criminal prosecution.

Compliance with code provisions

« **Art. R. 4312-2.** - All nurses when registering to practice must declare to the Departmental Council of the Order that they are familiar with this code of ethics and must promise under oath and in writing to abide by it.

Duty of humanity

« **Art. R. 4312-3.** - A nurse, in the service of people and public health, must discharge her or his duties with full respect for human life. A nurse must respect the dignity and privacy of patients, their families, and the people close to them.

« A nurse must continue to show such respect for human life after the death of a patient.

Observance of fundamental principles

« **Art. R. 4312-4.** - A nurse must in all circumstances be trustworthy and act with integrity, loyalty, and humanity, as is essential for the practice of nursing.

Professional secrecy

« **Art. R. 4312-5.** – All nurses must comply with the legally established rules of professional secrecy.

« A nurse must inform all persons assisting her or him of their obligations of professional secrecy.

Professional independence

« **Art. R. 4312-6.** – A nurse must not compromise her or his professional independence in any way whatsoever.

Duty of assistance

« **Art. R. 4312-7.** – When a nurse is in the presence of a person who is ill, injured, or at risk, or has been informed that a person who is ill or injured is vulnerable or at risk, she or he must provide assistance to such person, or must ensure that such person receives the necessary care.

Support for public health

« **Art. R. 4312-8.** – A nurse must provide support for actions taken by the competent authorities to protect public health and promote health education.

« When called upon by a qualified authority to participate in an emergency response procedure implemented in the event of an emergency or a disaster, a nurse must respond to this request and provide her or his support.

Honor of the profession

« **Art. R. 4312-9.** – A nurse must refrain, even when not practicing her or his profession, from any conduct that might bring the profession into disrepute.

« In particular, when communicating with the public, she or he must communicate tactfully and must take great care when mentioning her or his membership in the nursing profession.

SECTION 2

Duties towards patients

Respect for the patient's interests and the nursing practice

« **Art. R. 4312-10.** - A nurse must act in the best interests of the patient under all circumstances.

« She or he must provide care in a conscientious, attentive way, in accordance with established scientific data.

« She or he must devote the necessary amount of time to such care by using the most appropriate scientific and professional methods so far as practicable. She or he must seek appropriate help from others, if necessary.

« She or he must not, unless there are exceptional circumstances, provide care or continue to provide care in fields outside her or his areas of knowledge, experience, or expertise, or that exceed the available resources.

« A nurse must not advise on or propose as beneficial and safe to a patient, or to those close to the patient, any illusory or insufficiently tested procedure. All types of quackery are forbidden.

Non-discrimination

« **Art. R. 4312-11.** - A nurse must listen to, examine, advise, educate, or provide care to all persons in the same conscientious manner, irrespective of their origin, customs, social or family condition, beliefs, religion, disability, state of health, age, sex, reputation, the opinion that the nurse may have about the person or the person's status within the French health insurance system.

« A nurse must provide her or his help under all circumstances.

« A nurse must always behave in an appropriate and attentive manner in her or his interactions with the person receiving care.

Continuity of care

« **Art. R. 4312-12.** - Whenever a nurse has agreed to provide care, she or he is required to ensure the continuity of such care.

« A nurse has the right to refuse to provide care for professional or personal reasons, except in the event of an emergency or if the refusal to provide care would constitute a breach of her or his duties towards humanity.

« If a nurse is obliged to interrupt the care process or decides not to provide care, and provided that the patient is not harmed as a consequence thereof, she or he must explain the reasons for doing so, refer the patient to a colleague or an appropriate source of care, and provide all information useful for the continuation of care.

Patient information

« **Art. R. 4312-13.** – A nurse must, in accordance with her or his professional expertise, uphold the right of all persons to be informed of the state of their health.

« This information relates to the care provided and the resources and techniques used, about which a nurse must provide all appropriate guidance. This obligation to inform applies to a nurse within the limits of her or his expertise as determined under Articles L. 4311-1 and R. 4311-1 et seq. In the event that a request for information goes beyond her or his field of expertise, a nurse must encourage the patient to request the information from a legally competent professional.

« A nurse must provide information that is honest, adequate, and intelligible. A nurse must take into account the patient's personality and ensure that the patient understands the information provided.

« When and only when this is not possible, or in the event of an emergency, a nurse may be exempted from the duty to inform.

« A person's desire not to be informed must be respected.

Patient consent

« **Art. R. 4312-14.** – A nurse must always seek the free and informed consent of the person she or he is examining or treating. When a patient is able to express her or his wishes and refuses the treatment proposed, the nurse must accept this refusal, after informing the patient of its consequences and, with the consent of the patient, after so informing the prescribing doctor.

« If the patient is unable to express her or his wishes, a nurse must not take any action before consulting with the personal advocate as provided for in Article L. 1111-6, or the family or, failing this, a person close to the patient.

« A nurse who has been asked to provide care to a minor or to an adult lacking capacity must, subject to the provisions of Article L. 1111-5, inform the patient's parents or legal representative and obtain their consent. In case of an emergency, even if such individuals cannot be contacted, a nurse must provide the necessary care. If the wishes of the relevant person can be obtained, a nurse must take them into account so far as practicable.

Cooperation with other healthcare providers

« **Art. R. 4312-15.** – A nurse must inform the patient of her or his adherence to a protocol by which she or he, in association with other healthcare providers, engages in cooperative arrangements involving transfers of activities or care, or the reorganization of their care practices with regard to the patient.

Consent of minors and adults lacking capacity

« **Art. R. 4312-16.** – The consent of a minor or an adult lacking capacity must always be sought if the person concerned is able to express her or his wishes and participate in decision-making.

Assistance to persons deprived of liberty

« **Art. R. 4312-17.** – A nurse who is asked to examine or provide care to a person deprived of liberty must not, whether directly or indirectly, and even if only by being present, encourage or support an attack on the person's physical or mental integrity or dignity.

« If she or he finds that the person deprived of liberty has been a victim of abuse or ill-treated, she or he must, subject to the agreement of the person, inform the judicial authorities. If the person deprived of liberty is a minor or a person who is unable to protect her- or himself due to her or his age or physical or mental condition, the agreement of the person concerned is not required.

Assistance to abused persons

« **Art. R. 4312-18.** – If a nurse discovers that a person she or he is treating is a victim of abuse, neglect, ill-treatment, or sexual abuse, she or he must, in a cautious and prudent manner, take the most appropriate steps to protect the person.

« If the person is a minor or is unable to protect her- or himself due to her or his age, illness, or physical or mental condition, a nurse must, except in certain specific circumstances assessed conscientiously by the nurse, inform the judicial, medical, or administrative authorities.

Pain management

« **Art. R. 4312-19.** – A nurse must at all times, through her or his professional actions, do her or his best to alleviate pain and suffering by the means most appropriate to the patient's condition and provide moral support.

« A nurse has a duty to provide care aimed at alleviating pain within the limits of her or his own expertise and with a medical prescription or in the context of a treatment protocol.

End-of-life care

« **Art. R. 4312-20.** – A nurse has a duty to use all means available to her or him to ensure that every person can live with dignity until death.

« A nurse specifically has a duty to help a patient access palliative care and support as required.

« A nurse must also, under the circumstances mentioned in the preceding paragraphs, provide support to those close to the patient.

« **Art. R. 4312-21.** – A nurse must continue to support her or his patient until the moment of the patient's death, must maintain, by appropriate treatment and procedures, the quality of life and dignity of a dying person, and must comfort those close to the dying person.

A nurse must not deliberately bring about a person's death.

Participation in or sponsoring of research activities

« **Art. R. 4312-22.** – When a nurse participates in research involving a human subject, particularly in the field of nursing care, or is the sponsor of such research, she or he must comply with the provisions of Section 2, Book 1 of the first part of this code.

« The same must apply with regard to a nurse's participation in organ removal as mentioned in Book II of that part.

Issuance of certificates and other documents

« **Art. R. 4312-23.** – In the course of her or his practice, a nurse will issue, on the basis of her or his findings, various types of certificates and documents, the production of which is a legal and regulatory requirement.

« These documents must be written legibly in French and dated, must identify the nurse, and must be signed by her or him. A nurse may provide the patient with a translation in the patient's own language.

« A nurse must not use any such document fraudulently or promote the fraudulent use of any such document. Issuing a medical certificate of convenience is also forbidden.

Unjustified advantages for the patient

« **Art. R. 4312-24.** – A nurse must not take any action designed to provide a patient with an unjustified or unlawful material advantage. Bribes are also forbidden, in money or in kind.

SECTION 3

Duties towards colleagues and other healthcare providers

Good professional relations

« **Art. R. 4312-25.** – A nurse must maintain good professional relations with her or his colleagues.

« Nurses must assist each other in adversity.

« A nurse must not, regardless of the medium or means of communication used, slander or smear the reputation of another nurse, or repeat comments that might harm another nurse's ability to practice her or his profession.

« A nurse in conflict with a colleague must seek conciliation through the Departmental Council of the Order if necessary.

Disciplinary proceedings and professional secrecy

« **Art. R. 4312-26.** – If questioned during disciplinary proceedings conducted by the Order, a nurse is required, to the extent consistent with professional secrecy obligations, to reveal all facts relevant to the proceedings that have been brought to her or his attention.

« Any voluntarily inaccurate statement may itself result in disciplinary action.

Ownership of scientific work

« **Art. R. 4312-27.** – A nurse may not take undue credit for a scientific discovery, in particular in a publication.

Relations with other healthcare providers

« **Art. R. 4312-28.** – A nurse must, in the best interests of patients, maintain good relations with other healthcare providers. A nurse must respect the professional independence of other healthcare providers.

« A nurse must not slander or smear the reputation of another healthcare provider, or repeat comments that might harm another healthcare provider's ability to practice her or his profession.

Collusion and unjustified advantages

« **Art. R. 4312-29.** – A nurse may not accept a commission for any professional procedure whatsoever.

« Any collusion between a nurse and other healthcare providers or any other physical or legal person is forbidden. Collusion means any understanding between two or more persons to obtain advantages at the expense of the patient or a third party.

« In particular, a nurse may not engage in similar practices with establishments manufacturing or selling products or services, materials, or devices necessary for the practice of her or his profession, ambulance companies or funeral homes, or any healthcare, medico-social, or social institutions.

Fee-splitting

« **Art. R. 4312-30.** – Fee-splitting between nurses or between a nurse and another healthcare provider is prohibited, except as provided in contracts validated by the Departmental Council of the Order. The acceptance of a fee-splitting arrangement or any request or offer to split fees is forbidden even if no fees are actually split.

Participation in the distribution of drugs and medical devices

« **Art. R. 4312-31.** – A nurse must not engage in or participate in any distribution of drugs, products, or devices for profit.

SECTION 4

Practice of the profession

Liability for professional procedures

« **Art. R. 4312-32.** – A nurse is personally responsible for her or his decisions as well as for the professional procedures she or he is authorized to perform.

« A nurse must not practice her or his profession under conditions that might compromise her or his independence, the quality of care, or patient safety.

Liability in the context of a nurse's own role and the treatments she or he prescribes

« **Art. R. 4312-33.** – Within the context of her or his own role and the limits laid down by law, a nurse is free to choose her or his own procedures and to prescribe the treatment she or he considers most appropriate.

« With due regard for her or his moral duty of assistance, a nurse must limit prescriptions and medical procedures to that necessary to ensure high-quality, safe treatment.

« A nurse must weigh up the benefits, drawbacks and consequences of the various possible types of care.

« **Art. R. 4312-34.** – A nurse must, to the best of her or his knowledge, answer all advance requests for information on the conditions for the reimbursement of prescribed products and devices.

Nursing care records

« **Art. R. 4312-35.** – A nurse must establish nursing care records for each patient, containing relevant and up-to-date information relating to the patient's care and follow-up.

« Irrespective of a nurse's mode of practice, she or he must protect the nursing care records from any unauthorized access.

« When a nurse uses electronic nursing care records, she or he must take all steps within her or his power to protect this data.

Supervision and coordination of professionals

« **Art. R. 4312-36.** – If she or he has any coordination or supervision duties, a nurse must ensure the proper performance of the services provided by the persons whose activities she or he coordinates or supervises, whether nurses, health care aides, pediatric nurses, medical-psychological assistants, nursing students, or any other person under her or his responsibility.

« A nurse is responsible for the services she or he provides in collaboration with the professionals she or he supervises.

« A nurse must ensure the proficiency of the persons helping her or him.

Hygiene rules

« **Art. R. 4312-37.** – A nurse must comply with and ensure compliance with hygiene rules with respect to her or his own person, the provision of care, the use of materials, and the maintenance of workplace premises.

« A nurse must ensure that the waste resulting from her or his professional procedures is managed properly in accordance with regulatory procedures.

Administration and use of drugs and medical devices

« **Art. R. 4312-38.** – A nurse must ensure that the drug, product, or medical device delivered is consistent with the prescription. A nurse must also check the dosage and expiration date of same. A nurse must comply with the instructions for all medical devices used.

« **Art. R. 4312-39.** – A nurse must do everything within her or his power to prevent unauthorized persons from accessing the drugs and products that the nurse uses in the course of her or his practice.

Duty to advise

« **Art. R. 4312-40.** – A nurse must propose to seek a second opinion from a doctor or any qualified professional when she or he deems it necessary.

Sharing information

« **Art. R. 4312-41.** – A nurse must share with the doctor any information she or he has that might assist with diagnosis or facilitate a better adjustment of the treatment or care.

Liability in connection with a medical prescription

« **Art. R. 4312-42.** – Except in an emergency, a nurse must carry out and comply with any written medical prescription that includes quantitative and qualitative information, and is dated and signed.

« A nurse must request additional information from the prescriber whenever she or he deems it necessary, in particular if she or he believes further clarification is required.

« If a nurse has a doubt about the prescription, she or he must verify the prescription with the prescriber or, when this is not possible, with another member of the relevant profession. When verification is impossible, and in case of clear and imminent risks to the health of the patient, a nurse must, in accordance with her or his own skills, follow the course of conduct that best preserves the patient's health and avoid any unjustified risks for the patient.

Liability in connection with the implementation of protocols

« **Art. R. 4312-43.** – A nurse must implement and comply with the protocols developed by a doctor set out in Articles R. 4311-7 and R. 4311-14.

« Whenever a nurse deems it necessary, she or he must ask the responsible doctor to establish a written, dated, and signed protocol.

« If a written protocol for emergency care is implemented or life-saving procedures are performed pending the arrival of a doctor, a nurse must provide the doctor with a written, dated, and signed report along with the patient's records. In case of an emergency, and where a protocol is not implemented, a nurse must decide which actions to take pending the arrival of a doctor. A nurse must do everything within her or his power to refer the patient to the most appropriate healthcare facility for the patient's condition.

Liability in connection with non-care activities

« **Art. R. 4312-44.** – A nurse intervening in connection with prevention, education, coordination, training, or supervision activities, or any other professional activity, must comply with all principles and rules set out in this code of ethics for such activities.

Emergency contraception

« **Art. R. 4312-45.** – In accordance with the law, a nurse may, under a national protocol determined in a decree, administer emergency contraception to minor and adult pupils in secondary schools in an emergency. A nurse must ensure that psychological support is provided to the pupil and must monitor the implementation of medical follow-up.

Continuous professional development

« **Art. R. 4312-46.** – To guarantee the quality of care a nurse provides and patient safety, she or he has the duty to update and further perfect her or his expertise. A nurse must take the necessary steps to ensure compliance with her or his continuous professional development obligations.

Duty of care

« **Art. R. 4312-47.** – A nurse must not disseminate new, insufficiently tested nursing techniques or processes in professional or medical environments without also providing all due reservations concerning these techniques or processes.

« A nurse also has the duty not to use new nursing techniques that could pose an unjustified risk to the patient.

Nursing students

« **Art. R. 4312-48.** – During the clinical placements of students, a nurse must ensure that the patient's consent is obtained prior to any examination performed by or care provided by the student or in the presence of the student. The student receiving such training must be informed in advance by the nurse of the need to respect the rights of patients as well as the duties of nurses set out in this code of ethics.

Professional secrecy in the field of science

« **Art. R. 4312-49.** – When a nurse uses her or his experience or documents for the purposes of training or scientific publication, she or he must ensure that all persons remain anonymous.

Use of a pseudonym in the practice of nursing

« **Art. R. 4312-50.** – Practicing nursing under a pseudonym is forbidden.

« A nurse who uses a pseudonym to pursue activities connected with the nursing profession must inform the Departmental Council of the Order of such pseudonym.

« Professionals acting in their private capacity under a pseudonym are prohibited from affirming their capacity as a professional without revealing their true identity, regardless of the means of communication used.

Tied interests

« **Art. R. 4312-51.** - A nurse who has ties with businesses and establishments that produce or exploit health products or with consultancy bodies involved with these products is required to inform the public of these ties when she or he is speaking at a public event, in a university setting, at a continuing education development event, or during a therapeutic education activity, or when making a statement to the written or audiovisual press, or in any written or online publication.

« **Art. R. 4312-52.** - A nurse must not receive benefits in kind or in cash in any form whatsoever, directly or indirectly, from businesses providing services or producing or marketing products covered by compulsory social security schemes. However, the exceptions set out in Article L. 4113-6 apply to nurses.

« **Art. R. 4312-53.** - A nurse must, in particular when she or he participates as an expert in a body, group, or other commission organized by public authorities, declare any interests capable of casting doubt on her or his impartiality and independence or of impairing the quality of the nurse's expertise or judgment. A nurse must comply with the procedures organized for these purposes by public authorities.

Duty of integrity

« **Art. R. 4312-54.** - A nurse must not use her or his professional status to attempt to obtain, for her- or himself or for others, an unwarranted benefit or advantage or to commit an act contrary to integrity.

Activities outside the profession

« **Art. R. 4312-55.** - A nurse must not engage in activities enabling her or him to derive benefit from her or his skills, which are recognized by law, outside the activities of care, prevention, health education, training, research, or providing an expert opinion.

« A nurse must not pursue any other professional activity unless that activity is compatible with the dignity and quality required by the nursing profession and is not excluded by applicable law.

Professional documents

« **Art. R. 4312-56.** - The only information that a nurse is allowed to mention on her or his professional documents and prescriptions is:

« 1° Her or his first and last name, Order registration number, professional address, telephone and fax numbers, email address, and the days and times she or he is available for consultation;

- « 2° If a nurse practices within an association or partnership, the names of the nurse's associates and the type of partnership;
- « 3° The nurse's status within the French health insurance system;
- « 4° Her or his degrees, titles, and functions when they are recognized under current French law;
- « 5° Reference to her or his membership of a certified management association;
- « 6° Any awards or honors recognized by the French Republic.

Impartiality and integrity when providing an expert opinion as a nurse

« **Art. R. 4312-57.** - A nurse must not agree to provide an expert opinion on matters in which her or his own interests, those of one of her or his patients, a person close to her or him, a friend, or a body that regularly calls on her or his services are at stake, or if her or his independence is affected in any way.

« A nurse who is called upon to provide an expert opinion on a patient's condition must not be, or have been, that patient's nurse.

« When practicing as a nursing expert, a nurse must recuse her- or himself if she or he considers that she or he is required to answer questions that are not strictly in the nursing domain, are beyond her or his knowledge or capacity, or that are likely to entail infringements of this code of ethics.

« **Art. R. 4312-58.** - Before providing an expert opinion on a patient's condition, a nurse must inform the patient of her or his role and the legal context in which her or his opinion is requested.

« A nurse asked to provide an expert opinion must respect the principle of an adversarial process during all expert assessment operations.

« When preparing her or his report, a nurse asked to provide an expert opinion may only provide information that answers the questions asked. Outside these limits, she or he must keep silent regarding anything she or he may have learned during the expert assessment operation.

« She or he must certify that she or he performed this work directly.

SECTION 5

Rules for various modes of practice

Sub-section 1 General rules

Modes of practice

« **Art. R. 4312-59.** - A nurse works in salaried practice or private practice. A nurse may also combine salaried and private practice.

Free care

« **Art. R. 4312-60.** - A nurse is entitled to provide care free of charge.

« **Art. R. 4312-61.** - It is forbidden for any nurse to poach clients or attempt to poach clients.

Sous-section 2 Salaried practice

Loyalty

« **Art. R. 4312-62.** - A salaried nurse, who is bound to her or his employer by a contract, or a public-sector employee, must not take advantage of her or his position to expand her or his personal client base.

Obligations of salaried nurses

« **Art. R. 4312-63.** - A nurse, irrespective of her or his status, must comply with her or his professional duties, in particular her or his obligations with regard to professional secrecy and the independence of her or his decisions.

« A nurse must not accept from her or his employer any limits on her or his professional independence under any circumstances. Irrespective of the place in which she or he practices, a nurse's first priority must be to act in the best interests of public health and patients and their safety.

« **Art. R. 4312-64.** - Under no circumstances can a nurse accept that her or his remuneration or the term of her or his appointment will depend, in whole or in part, on standards of productivity, hourly performance, or any other provision that would result in her or his independence being limited or relinquished, or in the quality or safety of care being impaired.

Contrats d'exercice salarié

« **Art. R. 4312-65.** - I. - Pursuant to the provisions of Article L. 4113-9, the practice of the nursing profession in whatever form, within a private sector company, organization, or institution, must be recorded in a written contract.

« This contract must define the respective obligations of the parties and specify the means enabling the professional to comply with the provisions of this code of ethics.

« II. - The relevant Departmental Council must be informed of any contract, renewal of contract, or amendment to a contract with one of the entities referred to in the first paragraph. This Departmental Council must ensure that the contract, renewed contract, or amended contract complies with the requirements of this code of ethics as well as, if they exist, with the essential provisions of standard contracts drawn up either by means of an agreement between the National Council of the Order and the relevant organizations or institutions, or in accordance with legal or regulatory provisions.

« III. - Any draft contract may be sent to the Departmental Council, which must notify its comments within one (1) month. Thereafter, its opinion must be deemed issued.

« IV. - The Departmental Council of the Order may, as it sees fit, forward contracts, draft contracts, or amendments to the National Council with a request for its opinion.

« V. - A nurse must sign and submit to the Departmental Council a statement in which the nurse certifies on her or his honor that she or he has not signed a side letter relating to the contract, to the renewal of the contract, or to an amendment submitted to the Council for examination.I.

« **Art. R. 4312-66.** - The regular practice of the profession of nursing, in any way whatsoever, within a government entity, a local authority, or a public establishment must be recorded in a written contract, except in those cases where the professional is an officer of the state, a local authority, or a public establishment, as well as in cases where the professional is governed by legal or regulatory provisions that do not require a contract to be concluded.

« A nurse must submit such contract to the Departmental Council of the Order. This Departmental Council may, as it sees fit, forward contracts or amendments to the National Council with a request for its opinion. The National Council must send its comments to the relevant administrative authority and to the relevant professional.

Sub-section 3

Private practice

Point 1

General duties

Location of private practices

« **Art. R. 4312-67.** - At her or his place of practice, a nurse must have at her or his disposal suitable facilities and the appropriate technical resources to accommodate and ensure the safety of patients, to provide proper care, and to comply with professional secrecy rules.

« A nurse must take particular care to sterilize and decontaminate the medical devices used and to dispose of medical waste as required by law.

« A nurse must not practice nursing under conditions that might compromise the quality of care and nursing procedures, or the safety of persons being examined.

« **Art. R. 4312-68.** - A nurse must not open a practice in a building in which another nurse practices without the consent of that nurse or, failing this, without the authorization of the Departmental Council of the Order. This authorization may only be denied for reasons relating to a risk of public confusion.

« The Departmental Council is deemed to have approved the request if no response is given within two (2) months of receipt of the request.

Public information

« **Art. R. 4312-69.** - The only information that a nurse is authorized to share in a directory or in any other form accessible to the public, in particular on a website, are her or his first and last names, professional address, professional telephone and fax numbers, professional email address, the qualification allowing her or him to practice as a nurse, and opening hours. A nurse must not share her or his personal contact information in any form accessible to the public.

« Nursing partnerships may publish their contact details under the same conditions.

« Any paid listing in a directory is considered an advertisement and as such is prohibited.

« However, if a publisher begins requiring payment to publish the information mentioned in the first paragraph, the Departmental Council of the Order may authorize such listings.

« **Art. R. 4312-70.** - A nurse may notify the presence of her or his professional premises only by means of professional plaques outside the premises, with one plaque displayed near the entrance to the building and the other plaque near the door to the nurse's practice. If necessary due to the layout of the premises, an additional sign showing the way may be displayed.

« The only information that a nurse is authorized to include on these plaques is her or his first and last names, telephone numbers, opening days and hours, and her or his degrees and titles. A nurse must indicate her or his status within the French health insurance system. This information must be displayed discreetly.

« Such plaques must not be larger than 25 cm by 30 cm.

« **Art. R. 4312-71.** - When a nurse opens a practice or moves the location of her or his practice, she or he may place two announcements in the press. These announcements must not look like an advertisement. The wording and format of publication of these announcements must be notified to the Departmental Council of the Order in the month prior to opening or moving the nurse's practice. If the location of the new practice is in a département different from the one in which the first practice was located, such announcements must also be notified to the Departmental Council of the département in which the new practice is located.

Secondary practice

« **Art. R. 4312-72.** - I. - A nurse must normally practice at her or his professional premises, used for her or his registration with the Departmental Council of the Order.

« II. - If required by public health needs, a nurse may practice in one or more places other than her or his usual professional premises when there is a lack of healthcare or an insufficient supply of healthcare in the relevant geographic area resulting in a detrimental impact on patients or the continuity of care.

« A nurse must take the necessary steps to ensure the quality, safety, and continuity of care at all her or his places of practice.

« III. - An application to open a practice at different premises must be sent to the Departmental Council with jurisdiction over the place concerned by any means providing a reliable record of the date on which the application was sent. This application must be sent together with all useful information on public health needs and the conditions of practice. If such information is insufficient, the Departmental Council must request additional information.

« The Departmental Council on whose roll a nurse is entered must be informed of the application if the intended place of practice is located in another département.

« The Departmental Council to which the application was sent is deemed to have approved the application if it does not respond within three (3) months of receipt of the application or the answer given to the request for additional information.

« IV. - Authorization is personal and non-transferable. Authorization may be withdrawn if the conditions set out in the preceding paragraphs are no longer met.

« V. - Any legal challenge to a decision to refuse, withdraw or revoke an authorization or against any implicit or express decision to grant authorization will only be admissible if an administrative appeal has first been heard by the National Council of the Order.

Private practice contracts

« **Art. R. 4312-73.** - I. - Any contract or amendment to a contract relating to the practice of nursing must be drawn up in writing. Any professional association or partnership must be recorded in a written contract.

Such contracts must respect the independence of each nurse.

« II. - The contracts and amendments mentioned in Point I must be transmitted to the Departmental Council of the Order to which the nurse is attached. The Council must check that such contracts and amendments comply with this code of ethics as well as, if they exist, with the essential terms of standard contracts drawn up by the National Council.

« The Departmental Council of the Order may, as it sees fit, forward contracts, amendments, constitutions of associations, or by-laws to the National Council with a request for its opinion.

« III. - Any contract of association or partnership agreement of a professional nature between one or more nurses and one or more healthcare professionals or any other person must be notified to the Departmental Council of the Order. The Departmental Council must forward such agreement or contract together with its opinion to the National Council, which must determine whether it is compatible with prevailing laws and the code of ethics, with a specific focus on the professional independence of nurses.

« IV. - Draft agreements or contracts drawn up for the purposes of implementing this article may be transmitted to the Departmental Council of the Order, which must make any comments within one (1) month.

« V. - A nurse must sign and submit a sworn statement to the Departmental Council certifying that she or he has not signed any side letter relating to the contract or the amendment that the Council has reviewed.

Group practices

« **Art. R. 4312-74.** - In cases where nurses practice in a group practice, whatever the legal status of the practice, each nurse practices under her or his own responsibility. Each nurse maintains her or his professional independence.

« A nurse must respect each patient's right to a free choice of nurse.

« A nurse may use documents with the header of the association or partnership of which she or he is a part. The signatory must be identifiable and her or his address must be mentioned.

Practice of itinerant nursing

« **Art. R. 4312-75.** - The practice of itinerant nursing is forbidden. However, exemptions may be granted by the Departmental Council of the Order in the interests of public health.

Advertising

« **Art. R. 4312-76.** - Nursing must not be practiced as a business.

Any direct or indirect form of publicity or advertising, and particularly any sign giving the premises the appearance of a place of business, is forbidden.

Commercial premises

« **Art. R. 4312-77.** - A nurse must not practice her or his profession in commercial premises and in any premises where drugs, devices or products relevant to her or his professional activities are offered for sale.

Elected office and administrative functions

« **Art. R. 4312-78.** - A nurse who holds an elected office or performs administrative functions must not use such office or functions to expand her or his client base.

Point 2

Duties towards patients

Professional relations

« **Art. R. 4312-79.** - A nurse must propose to seek a second opinion from a colleague as and when circumstances require. A nurse must agree to a request for a second opinion by the patient or those close to the patient. Following the consultation, and with the patient's consent, the colleague from whom a second opinion has been sought must report in writing, if appropriate by electronic means, to the patient's usual nurse, indicating her or his findings, conclusions, and prescription, if any.

« When the opinions of the nurse from whom a second opinion has been sought and the patient's usual nurse differ significantly, the latter must inform the patient. If the patient or those close to the patient prefer to follow the opinion of the second nurse, the nurse treating the patient is free to stop providing care. The nurse from whom a second opinion was sought must not take the initiative, during the treatment on which her or his opinion has been sought, of asking the patient to consult her or him again or reexamine the patient.

Fees

« **Art. R. 4312-80.** - A nurse must inform the patient of the fees for the procedures performed during treatment as well as her or his status with regard to the CNI (National Agreement on Nursing) provided for in the French Social Security Code. A nurse must display such information in her or his place of work in a clearly visible manner.

« A nurse may never refuse to provide explanations relating to her or his fees. A nurse may never impose a specific method of payment on her or his patients.

« A nurse whose fees are not regulated by agreement must set her or his fees with tact and moderation.

« When nurses collaborate together or cooperate with other healthcare providers, each nurse must present an individual and separate statement of fees.

Fraud and improper coding

« **Art. R. 4312-81.** - Any fraud, improper coding, or inaccurate indication regarding procedures performed is forbidden.

Point 3

Duties towards colleagues

Prevention of unfair competition and collusion

« **Art. R. 4312-82.** - A nurse is forbidden from engaging in any form of unfair competition, particularly any collusion, commission, fee-splitting, or poaching of clients.

Locum nurses

« **Art. R. 4312-83.** - A nurse can only be replaced temporarily in her or his practice by a colleague with or without professional premises. In the latter case, and without prejudice to the rules on health insurance, the locum nurse must hold a replacement authorization that is valid for a period of one year, and which may be renewed, issued by the Departmental Council of the Order with which the nurse is registered.

« A locum nurse must not replace more than two nurses at the same time, including in an association of nurses or in a group practice.

« All locum contracts must be submitted by the locum nurse and the nurse being replaced to the Departmental Council or Departmental Councils to which such nurses are attached.

« **Art. R. 4312-84.** - During the replacement period, a nurse who is being replaced must refrain from all professional nursing activities, except to assist a person at risk or in response to requests from the authorities in case of an emergency or a disaster, as mentioned in the second paragraph of Article R. 4312-8.

« When a nurse being replaced works within an association or a partnership, she or he must inform such association or partnership of the locum nurse.

« **Art. R. 4312-85.** - A nurse may be replaced for a period of time corresponding to her or his period of unavailability. However, a nurse who is banned from practicing under a disciplinary decision cannot be replaced during the disciplinary period.

« Beyond a period of twenty-four (24) hours, or in case of a replacement lasting less than twenty-four (24) hours but reoccurring on multiple occasions, a written replacement contract must be drawn up between the two parties and sent to the Departmental Council of the Order.

« **Art. R. 4312-86.** - A locum nurse without professional premises must perform her or his replacement duties under her or his own responsibility at the professional premises of the nurse being replaced.

« A locum nurse in private practice may, with the consent of the nurse being replaced, see patients in her or his own practice.

« **Art. R. 4312-87.** - Once the replacement period is over and the locum nurse has ensured the continuity of care, she or he must stop practicing as such and must stop providing care to the patients of the nurse she or he replaced.

« A nurse who has served as a locum for one of her or his colleagues for a period of more than three (3) months, whether consecutive or non-consecutive, must not, for a period of two (2) years, open a practice by which she or he may be in direct competition with the nurse for whom she or he served as a locum or, as the case may be, with the other nurses in the same association or partnership as the nurse for whom she or he served as a locum, unless all the nurses concerned have reached an agreement to that effect. In such a case, the Departmental Council of the Order must be informed of the agreement. In the absence of such an agreement, the matter must be referred to the Departmental Council for review and the practice can only be established if approved by such Council.

Practicing with a self-employed colleague

« **Art. R. 4312-88.** - A nurse may choose to practice in cooperation with one or more self-employed colleagues under the conditions set out in Article 18 of Act no. 2005-882 of August 2, 2005 in favor of small and medium-sized enterprises.

« Each nurse must practice in full independence, with no hierarchical relationship with another nurse, and in compliance with the rules of good practice, in particular the patient's right to a free choice of nurse, the ban on collusion, and the ban on unfair competition.

Sub-section 4

Miscellaneous and final provisions

Informing the Council of the Order

« **Art. R. 4312-89.** - A nurse who modifies her or his conditions of practice, including her or his professional address, or stops practicing nursing, must inform the Departmental Council without delay. The Departmental Council must acknowledge these changes and inform the National Council.

Statements to the Council of the Order

« **Art. R. 4312-90.** - Any nurse who deliberately makes an inaccurate or incomplete statement to the Departmental Council of the Order may face disciplinary proceedings. The same applies for the concealment of professional contracts.

Appeals against decisions by Councils of the Order

« **Art. R. 4312-91.** - All decisions made by the Order of Nurses in application of this code of ethics must state the reasons on which they are based.

« Decisions by Departmental Councils may be amended or overturned by the National Council of the Order either at its own initiative or at the request of the parties concerned. Any such request must be submitted within two (2) months of notice of the decision.

« Any legal challenge to a decision made by a Departmental Council will only be admissible if an administrative appeal has first been heard by the National Council of the Order.

Disciplinary proceedings

« **Art. R. 4312-92.** - Articles R. 4126-1 to R. 4126-54 are applicable to nurses.

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either in writing at the following address:
CONSEIL NATIONAL DE L'ORDRE DES INFIRMIERS
228, rue du Faubourg-Saint-Martin - 75010 Paris, France

or by email at the following address:
contact@ordre-infirmiers.fr



CONSEIL NATIONAL DE L'ORDRE DES INFIRMIERS

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