Standards of Practice for Licensed Practical Nurses on the Performance of Restricted Activities

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Definitions

In these restricted activities standards:

**Authorized practitioner** means a person regulated under the *Health Professions Act* or the *Health Disciplines Act* who is authorized to perform restricted activities by regulations made under the *Health Professions Act* or the *Health Disciplines Act*.

**Client** means any person to whom a Licensed Practical Nurse provides a restricted activity.

**Competencies** means detailed statements that define the knowledge, skills, behaviors, and attitudes required by a Licensed Practical Nurse to practice within the profession and as provided in the College of Licensed Practical Nurses of Alberta’s *Competency Profile for Licensed Practical Nurses*.

**Compound** means compound as defined in Schedule 7.1 of the *Government Organization Act*.

**Dispensing a medication incidental to the practice of practical nursing** means the preparation and provision of a medication to the client for the client to take at a later time.

**Health Service** means a health service as defined in Schedule 7.1 of the *Government Organization Act*.

**Licensed Practical Nurse** or **LPN** means a person registered on a register listed in Section 2 of the *Licensed Practical Nurses Profession Regulation*.

**Medication** means a drug as defined in the *Pharmacy and Drug Act*.

**Regulated health professional** means a health professional regulated under the *Health Professions Act* or *Health Disciplines Act*.

**Restricted Activity** means an activity listed in Section 2 of Schedule 7.1 of the *Government Organizational Act*.

**Scope of Practice** means the scope of practice of LPNs as described in Section 3 of Schedule 10 to the HPA.

**Standards of Practice** means standards of practice that have been adopted by the Council of the College of Licensed Practical Nurses of Alberta.

**Supervision** means direct, indirect or remote forms of supervision as described below:
• **Direct supervision** means that the authorized practitioner who is providing the supervision is present in the practice setting at the point of care. This means that the authorized practitioner is providing supervision ‘at the side of’ the LPN being supervised.

• **Indirect supervision** means that the authorized practitioner who is providing the supervision is available for guidance and consultation but is not directly at the side of the LPN being supervised. This means that the authorized practitioner is readily available on the unit or in the same location where the care is being provided. In community health settings, being readily available at the same location where the care is being provided means that the authorized practitioner is physically present in that setting.

• **Remote supervision** means that the authorized practitioner who is providing the supervision is readily available for consultation and guidance but is not physically present in the location where the care is being provided but is able to be contacted through the use of technology. This means that the authorized practitioner who is supervising the LPN may be within the facility or agency, or can be reached by the telephone, pager or other electronic means when the LPN being supervised needs verbal assistance or guidance in providing client care.

**Supervision Requirements for members registered on the temporary register** – LPNs registered on the temporary register may perform restricted activities *only while supervised* in a manner satisfactory to the Registrar in accordance with any temporary Registration practice guidelines developed by the Registrar (section 6(6) of the Regulation).
Introduction

The Health Professions Act (HPA) requires that all regulated health professions establish standards of practice. Standards of practice promote safe, competent and ethical practice. The Council of the College of Licensed Practical Nurses of Alberta (CLPNA) has adopted two separate standards of practice that must be met by all of Alberta’s Licensed Practical Nurses (LPNs). They are:

- the Standards of Practice for Licensed Practical Nurses in Canada and
- this document, the Standards of Practice for the Licensed Practical Nurses on the Performance of Restricted Activities.

Alberta’s Perioperative LPNs must also meet the Canadian Council for Practical Nurse Regulators’ Standards of Practice and Competencies for Perioperative Licensed Practical Nurses.

Standards of Practice for Licensed Practical Nurses in Canada

The Standards of Practice for Licensed Practical Nurses in Canada (Standards of Practice) is the overarching standard of practice that every Alberta LPN must meet. The Standards of Practice provide the minimum standard of performance that LPNs are expected to meet in their nursing practice. LPNs should always strive to practice above the minimum standards. Performance below the minimum standard could result in disciplinary action. Standards of practice are enforceable under the HPA and are used as a reference in reviewing complaints against LPNs.

Standards of Practice for Licensed Practical Nurses on the Performance of Restricted Activities

In addition to the Standards of Practice, LPNs must also meet the standards outlined in these standards, the Standards of Practice for Licensed Practical Nurses on the Performance of Restricted Activities (Restricted Activity Standards). The Restricted Activity Standards build on the CLPNA’s overarching Standards of Practice and deal specifically with standards of practice that must be met by LPNs when the LPN is performing restricted activities. In addition to the overarching Standards of Practice, the Restricted Activity Standards provide the minimum standard of performance that LPNs are expected to meet when performing restricted activities. Performance below the minimum Restricted Activity Standards could result in disciplinary action. Standards of practice are part of the overall legislative framework that governs the LPN Profession in Alberta. Other legislation and documents which govern the LPN profession include the:

- Schedule 7.1 of the Government Organization Act (Appendix 1)
- Health Professions Act (including Schedule 10; Appendix 2)
LPNs practicing in Alberta must understand and comply with all of these documents. It is the responsibility of all LPNs to understand these documents and apply them to their nursing practice, regardless of practice setting or areas of responsibility.
Standards Common to all Restricted Activities

This document presents thirteen (13) restricted activities that LPNs are authorized to perform through the Licensed Practical Nurses Profession Regulation (Regulation). The 13 restricted activities mirror the restricted activities listed in Section 13 of the Regulation.

There are a number of ‘common’ standards that thread through all 13 restricted activities. The common standards are listed below. The LPN must meet all of the common standards when performing any of the 13 restricted activities.

It is mandatory that for each restricted activity performed, the LPN meets both the standards common to all restricted activities and the unique standards that are specific to each of the 13 restricted activities presented in this document.

Please note:

Despite any authorization to provide a restricted activity, an LPN must always restrict her or himself to performing activities that are within the scope of practice of practical nursing that the LPN is competent to perform, and that are appropriate to the LPN's area of practice and the procedures being performed (Section 20 of the Regulation).

The following standards are common to all 13 restricted activities:

The LPN must

- be responsible and accountable for their practice of providing safe, ethical, and competent care;
- have the education, knowledge, judgment and competence to safely perform the restricted activity;
- have the ability to identify risks and precautions and be able to respond to adverse events appropriately while providing ongoing assessment and monitoring of the client;
- ensure that any adverse events or side effects are managed and/or are communicated to the appropriate care providers in a timely manner;
- adhere to organizational policies and any standards, procedural guidelines and protocols related to the restricted activity;
• assess the client, the environment and the procedure to ensure safety and minimize risks prior to performing the restricted activity;

• educate the client prior to and during the restricted activity and advise the client of any follow up care that may be necessary;

• have knowledge and understanding of the specific instruments and technology being utilized to perform the restricted activity;

• document and report according to legislation, employer policy and best practice guidelines;

• maintain competency in their performance of restricted activities;

• apply infection prevention and control techniques to prevent contamination of persons, equipment and environment (e.g., employ routine nursing practices, perform aseptic or sterile technique);

• advocate in the best interest of the client during the performance of restricted activities;

• ensure that informed consent has been obtained from the client or client designate prior to performing a restricted activity;

• regarding authorized prescriber orders, prior to performing any restricted activity, the LPN must ensure that there is a complete authorized prescriber order prior to carrying out the restricted activity. The LPN must clarify the order if the order is incomplete or does not appear appropriate for the client. For example, inserting instruments, administering IV medications, blood or blood product, parenteral nutrition, contrast agents, nitrous oxide, applying ultrasound imaging, must not be administered or carried out until a client specific order is in place and the order is clarified by the prescriber as required. No treatment shall be provided until the prescriber order is clarified and complete;

• regarding medical protocols such as administration of epinephrine for anaphylaxis, bowel routines, administering contrast agents before diagnostic imaging etc., the LPN must ensure there is an established employer protocol prior to initiating the restricted activity. If the protocol is incomplete, the LPN must clarify the protocol with the employer prior to administering medication or performing the restricted activity. No protocol shall be initiated until the protocol is clarified and complete;

• regarding nursing protocols such as changing a catheter, reinserting an intravenous (IV) that is interstitial, or providing advanced foot care, the LPN must ensure there is appropriate employer authorization in place (i.e., job description, policy, procedures, protocols) prior to initiating the restricted activity. If the authorization is unclear to the LPN, the LPN must clarify the authorization with their supervisor prior to carrying out the restricted activity.
STANDARD 1 - Administer medications by invasive procedure and perform invasive procedures: cut a body tissue, administer anything by an invasive procedure on body tissue or perform surgical or other invasive procedures on body tissue below the dermis or mucous membrane.

Preamble:

LPNs are authorized in the Regulation to independently perform certain invasive procedures that are within the practice of practical nursing such as, but not limited to, administering medication by injection or infusion, cutting body tissue (i.e., removing a corn or callus as part of advanced wound care and advanced foot care), and performing a renal dialysis treatment.

Medication administration by invasive procedure

The LPN may prepare, initiate, monitor, titrate and discontinue the delivery of fluids and medications that include, but are not limited to, intravenous (including central line and peripherally inserted central catheter), injection, intradermal, intramuscular and subcutaneous routes. The LPN may administer medications by invasive procedure under the following conditions:

The LPN must adhere to the common standards for restricted activities in addition to the specific restricted activity standards outlined below:

- the LPN must have the education, knowledge, judgment and competence to safely prepare, initiate, administer, monitor, titrate and discontinue medications or fluids being administered in accordance with this standard;

- the LPN must adhere to all rights and checks of medication administration to ensure client safety.

The LPN may also administer medications by all routes authorized in Standard 2 to this document.

Note: Administration of medications by non-invasive routes are not restricted activities; non-invasive routes of medication administration include routes such as oral, topical, and inhalation. However, all medication administration must be performed in accordance with the overarching Standards of Practice, Code of Ethics, and the Competency Profile for LPNs.
Renal Dialysis

The LPN practice of renal dialysis requires advanced knowledge and competency. The LPN with a dialysis certification recognized by their employer is authorized to administer medications by invasive procedure or perform invasive procedures as part of their renal dialysis nursing practice, under the following conditions:

- the LPN must have successfully completed a renal dialysis nursing education program recognized by the employer; and
- must have successfully completed any certification requirements set forth by their employer.

Advanced Foot Care

LPNs providing foot care services must follow the nursing process throughout care delivery in all settings. Advanced foot care is considered a restricted activity because it may involve the removal of tissue, specifically the reduction of corns and calluses. To perform advanced foot care, including removal of corns and calluses the LPN must complete an education program containing theory and supervised lab practice, beyond what is taught in the basic practical nurse program.

The LPN must have the education, knowledge, judgment and competence in the skill of safely performing advanced foot care in accordance with the competencies outlined in the CLPNA Competency Profile including competencies in the following areas:

- principles and application of padding and strapping techniques
- contraindications of padding
- removal of tissue: corns and calluses
- operation of manual and electronic tools and devices

In advanced foot care, as with any restricted activity, the LPN must assess and refer those clients whose condition may be better treated by another regulated health professional and refer the client as appropriate.

LPNs providing advanced foot care as part of their self-employed practice, must follow the Self-Employed Practice Guidelines of the CLPNA.
STANDARD 2 – Insert or remove instruments, devices, fingers or hands during client care:
- beyond the cartilaginous portion of the ear canal,
- beyond the point in the nasal passages where they normally narrow.
- beyond the pharynx
- beyond the opening of the urethra
- beyond the labia majora
- beyond the anal verge, or
- into an artificial opening into the body.

Preamble:

The restricted activities listed here in Standard 2 include a wide range of nursing interventions for which the LPN obtains the required competencies through the basic practical nurse education program and employer certification in some cases.

These restricted activities include, but are not limited to, otoscope use, insertion of a nasogastric tube, urinary catheterization, inserting a rectal or vaginal suppository, administering an enema, and suctioning tracheal tubes, flushing stomas and performing PAP tests.

The LPN must adhere to the Standards Common to all Restricted Activities.
STANDARD 3 – Licensed Practical Nurse with a Perioperative Specialty:

An LPN who:

i) meets the educational requirements approved by the Council, and
ii) who has been authorized to do so by the Registrar

may within the practice of perioperative practical nursing and in accordance with the standards of practice adopted by the Council governing the restricted activities perform restricted activities under the supervision of an authorized practitioner.

Preamble:

To practice as an LPN with a perioperative specialty in Alberta, the LPN must have a valid perioperative specialty authorization on their practice permit. Only LPNs who meet the educational requirements approved by the Council, and who have been authorized by the Registrar, may practice as an LPN with a perioperative specialty.

The LPN with a perioperative specialty fulfills the role of the perioperative nurse in preoperative, intraoperative and immediate post-operative patient care. The LPN with a perioperative specialty authorization is authorized to perform the restricted activities in Standards 1 and Standard 2 of this document during the performance of their duties as a Perioperative LPN under the following conditions:

The LPN with perioperative specialty must:

- adhere to all Common Standards of Practice for all LPN Restricted Activities;
- have successfully completed perioperative nursing education and training through an education program approved by the Council;
- be authorized by the Registrar to practice the LPN perioperative specialty. The LPN must ensure that a perioperative specialty authorization is indicated on the LPN’s practice permit prior to engaging in perioperative nursing practice;
- work under the indirect supervision of an authorized practitioner;
- be a client advocate, sensitive to the client’s state of vulnerability during the perioperative phase;
adhere to best practice standards in perioperative nursing in accordance with the *Standards of Practice and Competencies for Perioperative Licensed Practical Nurses*.

**Supervision Requirements**

LPNs learning the perioperative specialty, when performing restricted activities associated with their learning, must be supervised by an LPN who has been authorized by the Registrar to practice the perioperative specialty or be supervised by another authorized practitioner. The supervising LPN or other authorized practitioner must be available to provide assistance. Supervision is interpreted to mean ‘indirect supervision’ [Section 21(1)].
STANDARD 4 – insert into the ear canal under pressure, liquid, air or gas.

Pre-amble:

All LPNs may perform the restricted activity of ear syringing, the instillation of a liquid under pressure into the ear canal for the purposes of removing a blockage of cerumen.

The LPN must adhere to the Common Standards of Practice for Restricted Activities.

Inserting air or gas under pressure into the ear canal may be performed under the direct, indirect or remote supervision of an authorized practitioner in accordance with employer policy.
STANDARD 5 – Dispense, compound, provide for selling or sell, incidental to the practice of practical nursing, a Schedule 1 or Schedule 2 drug.

Preamble:

LPNs dispense, compound, and provide medications to clients as part of their practice as an LPN.

Dispensing

For the purposes of these standards, dispensing a medication incidental to the practice of practical nursing, means the preparation and provision of a medication to the client for the client to take a later time. This includes the preparation and dispensing of medication for “pass” or “to go”, or providing a small amount of “bridge medication” until the client can fill the prescription provided by an authorized prescriber, provide a small sample of medication, and preparing medications in a dosette/unit dose.

The LPN may prepare and provide a drug to a client for the client to take a later time if the following conditions are met:

The LPN must

- adhere to the Common Standards of Practice for Restricted Activities;

- ensure there is a complete medication order from an authorized prescriber. If the order is incomplete, medications must not be dispensed until the medication order is clarified by the prescriber;

- have determined that a pharmacist is not available to dispense the medication;

- have the education, knowledge, judgment, and competence to safely prepare, and provide medications to the client to take at a later time;

- have a comprehensive understanding of preparation, dispensing and selling as it relates to the practice of practical nursing and the organization/care setting;

- assess the client, environment and the medication when preparing, dispensing the medications;
- dispense the minimum amount of medication necessary to ensure the health, safety, and ongoing treatment requirement of the client (for example, not more than 72 hours supply as per agency policy);
- have the ability to identify any risks and precautions and instruct the client on how to manage any adverse reactions should they occur;
- adhere to the rights and checks of medication administration to reduce the risk of medication error and ensure client safety;
- ensure that the medication form and dosage is accurate and aligns with what is indicated on the prescription;
- dispense the medication in appropriate packaging with consideration to any need to protect against light, need for child resistant containers or any other indications specific to the medication that must be considered;
- have a label affixed to the drug container or packaging that is legible and identifies the following:
  - the name, address and telephone number of the facility and unit from which the drug is dispensed,
  - the name of the patient,
  - the name of the prescriber,
  - instructions for use,
  - the date the drug was dispensed,
  - the quantity dispensed, and
  - the expiry date, when appropriate;
- educate the client about the medications they are dispensing to them; and
- follow any organizational policy and procedural guidelines related to dispensing, providing for sale or sell, incidental to the practice of practical nursing.

**Compounding:**

LPNs perform compounding as part of their practice when mixing two (2) or more medications for administration by injection or ingestion, or when mixing a medication and an IV solution for intravenous infusion. Reconstituting a medication with water only is not compounding.

- **LPNs must adhere to the Common Standards of Practice for Restricted Activities.**
Selling:

A standard on the LPN ‘selling’ a medication has been included in this document to address the definition of “sell” in Schedule 7.1 of the Government Organization Act (GOA). Schedule 7.1 provides that “sell” includes distributing and giving a medication away for free i.e., providing medications to the client at no cost.

The role of the LPN in ‘selling’ of medication must be limited to providing a small amount of medication at no cost to the client to take at a later time i.e., “pass”, “to go” or “bridge medications” or providing medications to a client in accordance with Health Canada’s Tuberculosis protocols.

The LPN must not charge the client a fee for the preparation and dispensing of medication for “pass”, “to go” or for “bridge medications”; the LPN may give away a medication without expectation of compensation.
STANDARD 6 – Administer a Vaccine.

Basic Immunization:
All LPNs may perform the restricted activity of administering the pneumococcal, tetanus or flu vaccines to clients of all ages. In order to perform this restricted activity, the LPN must have had training pertaining in the administration of vaccines in their basic practical nurse educational program or have taken a post-basic education specific to immunization/vaccination prior to administering vaccine.

The LPN may administer the pneumococcal, tetanus or flu vaccine under the following conditions:

- adhere to the Common Standards of Practice for Restricted Activities;
- have the knowledge and ability to adhere to employer policies and any standards, procedural guidelines, and protocols in the preparation and administration of immunizing/biological agents;
- the employer must have established immunization protocols in place related to the administration of immunizations.

Advanced Immunization:
The LPN with advanced knowledge and competency is authorized to administer vaccine to clients of all ages, including travel immunizations in accordance with Alberta’s Immunization Schedule and the Canadian Immunization Guide under the following conditions:

The LPN must

- have successfully completed an immunization nursing education program as accepted by the CLPNA;
- meet the requirements set forth by their employer to administer a vaccine prior to administering a vaccine;
- have the knowledge and ability to adhere to organizational policies, standards and protocols in the preparation and administration of vaccine;
- the employer must have established immunization protocols in place related to administering vaccine;
- an authorized practitioner must be available for consultation while this restricted activity is being performed. This availability for consultation may be direct, indirect or remote.
STANDARD 7 – Administer Parenteral Nutrition.

Preamble:

The practice of administering parenteral nutrition (TPN) includes client assessment, preparation, checking, initiating, administering, monitoring, titrating and discontinuation of TPN.

The LPN may administer TPN under the following conditions:

The LPN must

- adhere to the Common Standards of Practice for Restricted Activities;

- have the ability to identify any risks and precautions, manage any adverse reactions and provide ongoing assessment and monitoring of the patient prior to, during and post TPN administration;

- adhere to the organizational procedural checks of TPN administration and discontinuation to ensure client safety;

- monitor the TPN infusion as per organizational policy and immediately advise the authorized prescriber and charge nurse of any adverse reactions or side effects in a timely manner.
STANDARD 8—Administer Blood and Blood Products.

Preamble:

The LPN practice of administering all blood and blood products may include preparing, cross-match checking, initiating, monitoring, titrating and discontinuing blood and blood products.

The LPN may administer blood and blood products under the following conditions:

The LPN must

- adhere to all Common Standards of Practice for all LPN Restricted Activities;
- have the knowledge and understanding of blood values, blood-typing, cross-matching and the knowledge and ability to be prepared for the administration of blood and blood products according to agency policy;
- have the ability to identify any risks, contraindications and precautions, manage any adverse reactions and provide ongoing assessment and monitoring of the patient prior to, during and post-blood and blood product administration;
- adhere to the agency policy and protocol related to cross-match checks of blood and blood product, preparation, administration and discontinuation to ensure client safety;
- monitor the infusion of blood and blood products as per the agency policy and immediately advise the authorized prescriber and/or charge nurse of any adverse reactions or side effects.
STANDARD 9 – Administer Diagnostic Imaging Contrast Agents.

Preamble:

All LPNs may provide the restricted activity of administering diagnostic imaging contrast agents. LPNs administer diagnostic contrast agents to clients in hospitals or in care before the client goes to the diagnostic imaging department for their diagnostic test, or the LPN may administer the contrast agent in the diagnostic imaging department as a team member.

The LPN may administer diagnostic imaging contrast agents under the following conditions:

The LPN must

- adhere to the Common Standards of Practice for Restricted Activities;

- have the ability to identify any risks, contraindications and precautions, manage any adverse reactions and provide ongoing assessment and monitoring of the patient prior to, during and post administration of diagnostic imaging contrast agents;

- adhere to the organizational procedural checks of preparation, administration and discontinuation of diagnostic imaging contrast agents to ensure client safety;

- monitor the administration of diagnostic imaging contrast agents as per agency policy and immediately advise the authorized prescriber and/or charge nurse of any adverse reactions or side effects.
STANDARD 10 – Administer Nitrous Oxide for Anesthesia or Sedation.

Preamble:

All regulated members may administer nitrous oxide for the purposes of anaesthesia or sedation.

The LPN may perform this restricted activity under the following conditions:

The LPN must

- adhere to the Common Standards of Practice for Restricted Activities;

- have the ability to identify any risks, contraindications and precautions, manage any adverse reactions, and provide ongoing assessment and monitoring of the patient prior to, during and post administration of nitrous oxide;

- adhere to the organizational procedural checks of administration and discontinuation of nitrous oxide to ensure client safety;

- monitor the administration of nitrous oxide as per organizational policy and immediately advise the authorized prescriber and/or charge nurse of any adverse reactions or side effects.
STANDARD 11 – Apply ultrasound imaging including any application of ultrasound to a fetus.

Preamble:

LPNs are authorized to apply non-ionizing radiation in ultrasound imaging, including any application of ultrasound to a fetus for the purposes of:

- Bladder scanning
- Fetal Heart Monitoring
- Other purposes within the scope of practice of an LPN such as, but not limited to:
  - assisting authorized practitioners under direct supervision with diagnostic or therapeutic procedures for example, ultrasound imaging to visualize the uterus during embryo implantation.

The LPN must

- have the education, knowledge, judgment and competence to safely applying non-ionizing radiation in the form of ultrasound imaging and have a comprehensive understanding of the specific technology being administered in that specific care setting;

- ensure they have an authorized prescriber’s order or established protocol for the application of non-ionizing radiation in the form of ultrasound imaging from an authorized prescriber prior to application;

- educate the patient prior to and during the procedure and advise of any follow up care that may be necessary;

- have the ability to identify the risks and precautions, manage any adverse reactions, and provide ongoing assessment and monitoring of the patient receiving non-ionizing radiation in the form of ultrasound imaging;

- follow any organizational policy and procedural guidelines related to the application of non-ionizing radiation in ultrasound imaging;

- ensure that the diagnostic results obtained from the application of ultrasound is reported to the appropriate care providers in a timely manner relative to the client situation.
STANDARD 12 - LPN, Orthopedic Specialty: Inserting or removing orthopedic devices and applying casts.

An LPN who:

i) meets the education requirements approved by the Council, and

ii) who has been authorized to do so by the Registrar

may within the practice of practical nursing and in accordance with the standards of practice adopted by the Council, insert or remove orthopedic devices and apply casts under the supervision of an authorized practitioner in conjunction with the restricted activity of to set or reset a fracture of a bone.

Preamble:

The LPN orthopedic specialty requires that the LPN have an orthopedic specialty authorization on their permit. Only LPNs who meet the educational requirements approved by the Council, and who have been authorized by the Registrar to practice the orthopedic specialty, may do so.

The LPN with an orthopedic specialty is authorized to perform the activities of inserting and removing orthopedic devices and applying casts in conjunction with an authorized practitioner who is setting or resetting a fracture of a bone, under the following conditions:

The LPN must

- adhere to all Common Standards of Practice for all LPN Restricted Activities;

- have successfully completed practical nurse orthopedic specialty training through an education program approved by the Council of the CLPNA;

- be authorized by the Registrar for an orthopedic specialty prior to practicing as an LPN with an orthopedic specialty;

- ensure that the orthopedic specialty authorization is indicated on the LPN’s practice permit prior to practicing as an LPN with an orthopedic specialty;

- ensure that they have an order from an authorized practitioner prior to initiating procedures related to orthopedic specialization;

- the manner of supervision i.e., direct, indirect, or remote, will depend on the complexity of the fracture and the service being performed. It is the responsibility of LPN to always restrict themselves in performing activities under supervision that are within the scope of an LPN with an orthopedic
specialty that they are competent to perform, and that are appropriate to their area of practice and the procedures being performed;

- the LPN with an orthopedic specialty must clarify, discuss and agree with the supervising authorized practitioner, the level of supervision required for the orthopedic specialty LPN to perform the activities.
STANDARD 13 – Provide psychosocial intervention as a member of a multi-disciplinary team while under the supervision of an authorized practitioner.

Preamble:

LPNs may provide psychosocial intervention as a member of a multi-disciplinary team while under the supervision of an authorized practitioner. For example, the LPN may work in an area of community mental health or in the area of addictions counseling, providing treatment as part of the care team.

A psychosocial intervention is a restricted activity only when it is performed with “an expectation of treating a substantial disorder of thought, mood, perception, orientation or memory that grossly impairs (i) judgment, (ii) behavior, (iii) capacity to recognize reality, or (iv) ability to meet the ordinary demands of life;” [section 2(1)(p) of Schedule 7.1 of the GOA].

Activities such as nursing assessment, client monitoring, counseling, providing advice and support and information on lifestyle choices etc. are not a restricted activity and can be performed independently by the LPN. However treating a client who has a substantial disorder using interventions to treat the disorder such as psychotherapy, cognitive behavior therapy that alters thoughts or moods is a restricted activity - the LPN must provide a psychosocial intervention as a member of a multi-disciplinary team under supervision of an authorized practitioner.

The LPN may perform psychosocial intervention as a member of a multi-disciplinary team under the following conditions:

The LPN must

- adhere to all Common Standards of Practice for all LPN Restricted Activities;

- collaborate with and perform the restricted activity of psychosocial intervention as a member of the care team;

- perform the restricted activity of psychosocial intervention while under the direct, indirect or remote supervision of an authorized practitioner;

- clarify, discuss and agree upon the level of supervision required for the LPN to perform the activities with the supervising authorized practitioner.
References


Government Organization Act, R.S.A 2000, Sch. 7.1

Licensed Practical Nurses Profession Regulation, Alta. Reg. 81/2003

Health Disciplines Act, R.S.A 2000, c. H-2

Health Professions Act, R.S.A 2000, c. H-7

Pharmacy and Drug Act, R.S.A 2000, c. P-13

Internet Links


Competency Profile for Licensed Practical Nurses: http://www.clpna.com/legislation-practice-policy/#legislative

Health Professions Act:
www.qp.alberta.ca/1266.cfm?page=h07.cfm&leg_type=Acts&isbncln=9780779738083

Pharmacy and Drug Act:

Standards of Practice and Competencies for Perioperative Licensed Practical Nurses:

Standards of Practice for Licensed Practical Nurses in Canada:
Appendix 1
(in Force; not a draft)

Schedule 7.1

Health Services Restricted Activities

Definitions
1 In this Schedule,

(a) “activity of daily living” means an activity that individuals normally perform on their own behalf to maintain their health and well-being, and includes

(i) routine and invasive self-care activities, including but not restricted to the removal of slivers and the cleaning of wounds, and

(ii) specifically taught procedures, which generally result in predictable and stable responses, including but not restricted to catheterization, maintenance of drainage tubes and administration of drugs by injection;

(a.1) “administration of a drug” means the supplying of a dose of a drug to a person for the purpose of immediate ingestion, application, inhalation, insertion, instillation or injection;

(b) “compound” means to mix together 2 or more ingredients of which at least one is a drug for the purposes of dispensing a drug or drugs, but does not include reconstituting a drug or drugs with only water;

(c) “dispense” means

(i) with respect to drugs, to provide a drug pursuant to a prescription for a person, but does not include the administration of a drug to a person;

(ii) with respect to corrective lenses, to verify corrective lenses objectively to the prescription;

(d) “drug” means drug as defined in the Pharmacy and Drug Act;

(e) “health service” means a service provided to people

(i) to protect, promote or maintain their health,

(ii) to prevent illness,

(iii) to diagnose, treat or rehabilitate them, or

(iv) to take care of the health needs of the ill, disabled, injured or dying;

(f) “Minister” means the Minister responsible for the Health Professions Act;

(g) “restricted activity” means an activity named as a restricted activity in section 2;

(h) “sell” includes

(i) distribute, trade or barter for money or other valuable consideration,

(ii) distributing and giving away without expectation or hope of compensation or reward,

(iii) keeping for sale, and
offering for sale;

(i) “surrogate” means a person authorized by an individual or by the individual’s guardian, if the guardian is authorized to give such authorization, to assist the individual in carrying on an activity of daily living.

**Restricted activities**

2(1) The following, carried out in relation to or as part of providing a health service, are restricted activities:

(a) to cut a body tissue, to administer anything by an invasive procedure on body tissue or to perform surgical or other invasive procedures on body tissue
   (i) below the dermis or the mucous membrane or in or below the surface of the cornea;
   (ii) in or below the surface of teeth, including scaling of teeth;

(b) to insert or remove instruments, devices, fingers or hands
   (i) beyond the cartilaginous portion of the ear canal,
   (ii) beyond the point in the nasal passages where they normally narrow,
   (iii) beyond the pharynx,
   (iv) beyond the opening of the urethra,
   (v) beyond the labia majora,
   (vi) beyond the anal verge, or
   (vii) into an artificial opening into the body;

(b.1) to insert into the ear canal
   (i) under pressure, liquid, air or gas;
   (ii) a substance that subsequently solidifies;

(c) to set or reset a fracture of a bone;

(d) to reduce a dislocation of a joint except for a partial dislocation of the joints of the fingers and toes;

(e) to use a deliberate, brief, fast thrust to move the joints of the spine beyond the normal range but within the anatomical range of motion, which generally results in an audible click or pop;

(f) to prescribe a Schedule 1 drug within the meaning of the *Pharmacy and Drug Act*;

(g) to dispense, compound, provide for selling or sell a Schedule 1 drug or Schedule 2 drug within the meaning of the *Pharmacy and Drug Act*;

(h) to administer a vaccine or parenteral nutrition;

(i) to prescribe, compound or administer blood or blood products;

(j) to prescribe or administer diagnostic imaging contrast agents;

(k) to prescribe or administer anesthetic gases, including nitrous oxide, for the purposes of anesthesia or sedation;
(l) to prescribe or administer radiopharmaceuticals, radiolabelled substances, radioactive gases or radioaerosols;

(m) to order or apply any form of ionizing radiation in
   (i) medical radiography,
   (ii) nuclear medicine, or
   (iii) radiation therapy;

(n) to order or apply non-ionizing radiation in
   (i) lithotripsy,
   (ii) magnetic resonance imaging, or
   (iii) ultrasound imaging, including any application of ultrasound to a fetus;

(o) to prescribe or fit
   (i) an orthodontic or periodontal appliance,
   (ii) a fixed or removable partial or complete denture, or
   (iii) an implant supported prosthesis;

(p) to perform a psychosocial intervention with an expectation of treating a substantial disorder of thought, mood, perception, orientation or memory that grossly impairs
   (i) judgment,
   (ii) behaviour,
   (iii) capacity to recognize reality, or
   (iv) ability to meet the ordinary demands of life;

(q) to manage labour or deliver a baby;

(r) to prescribe or dispense corrective lenses.

(2) Despite subsection (1), the following are not restricted activities:

(a) activities of daily living, whether performed by the individual or by a surrogate on the individual’s behalf;

(b) giving information and providing advice with the intent of enhancing personal development, providing emotional support or promoting spiritual growth of individuals, couples, families and groups, and

(c) drawing venous blood.

Regulations

3 On consulting with the Health Professions Advisory Board under the Health Professions Act, the Minister may make regulations authorizing a person or a category of persons other than a regulated member or category of regulated members under the Health Professions Act, to perform one or more restricted activities subject to any conditions included in the regulations.
Public health emergency

3.1 For the purposes of preventing, combating or alleviating a public health emergency as defined in the *Public Health Act*, the Minister may by order authorize a person or category of persons to perform one or more restricted activities subject to any terms or conditions the Minister may prescribe.

Offence

4(1) No person shall perform a restricted activity or a portion of it on or for another person unless

(a) the person performing it

(i) is a regulated member as defined in the *Health Professions Act*, and is authorized to perform it by the regulations under the *Health Professions Act*,

(ii) is authorized to perform it by a regulation under section 3,

(iii) is authorized to perform it by an order under section 3.1, or

(iii) is authorized to perform it by another enactment,

or

(b) the person performing it

(i) has the consent of, and is being supervised by, a regulated member described in clause (a)(i), and

(ii) is permitted to perform the restricted activity under a regulation made under section 131(1)(d)(i) of the *Health Professions Act* by the council of the college of the regulated member referred to in subclause (i), and there are regulations made under section 131(1)(d)(ii) of the *Health Professions Act* by the council of the college of that regulated member respecting how regulated members must supervise persons who provide restricted activities under this clause.

(2) Despite subsection (1), if no person who is authorized under subsection (1) is available to perform the restricted activity or a portion of it, a person may without expectation or hope of compensation or reward provide a restricted activity or a portion of it to provide physical comfort to or to stabilize another person who is ill, injured or unconscious as a result of an accident or other emergency.

(3) No person, other than a person authorized to perform a restricted activity under subsection (1)(a), shall or shall purport to consent to, provide supervision of and control of, another person performing the restricted activity or a portion of a restricted activity.

(4) No person shall require another person to perform a restricted activity or a portion of a restricted activity if that other person is not authorized in accordance with subsection (1) to perform it.

Penalty

5(1) A person who contravenes section 4 is guilty of an offence and liable

(a) for a first offence, to a fine of not more than $5000,

(b) for a 2nd offence, to a fine of not more than $10 000, and

(c) for a 3rd and every subsequent offence, to a fine of not more than $25 000 or to imprisonment for a term of not more than 6 months or to both fine and imprisonment.
(2) A prosecution for an offence under this Schedule may not be commenced more than 2 years after the date on which the alleged offence occurs.

Burden of proof

6 In a prosecution under this Schedule, the burden of proving that a person was authorized to perform a restricted activity by section 4(1) is on the accused.

Injunction

7 The Court of Queen’s Bench, on application by a person authorized by the Minister, may grant an injunction enjoining any person from doing any act that contravenes section 4 despite any penalty that may be provided by section 5 in respect of that contravention.

RSA 2000 cH-7 s137; RSA 2000 cP-13 s47; 2001 c21 s25; 2005 c13 s2; 2006 c19 s1; 2007 c23 s3; 2009 c53 s73
Appendix 2

(In Force; not a draft)

Schedule 10

Profession of Licensed Practical Nurses

Practice

3 In their practice, licensed practical nurses do one or more of the following:

(a) apply nursing knowledge, skills and judgment to assess patients’ needs,
(b) provide nursing care for patients and families,
(b.1) teach, manage and conduct research in the science, techniques and practice of nursing, and
(c) provide restricted activities authorized by the regulations.

RSA 2000 cH-7 Sched. 10 s3;2008 c34 s24