

Incorporating a Restricted Activity into Practice

Guidelines

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Purpose

This document provides guidelines and a decision-making framework to determine if a specific **RESTRICTED ACTIVITY**¹ not currently performed by a **REGISTRANT** should be part of their nursing practice in a specific practice area. The guidelines and decision-making framework within this document outlines the requirements to support the registrant in safely and competently performing the restricted activity in their practice setting. **CLIENT** health needs, the context of practice, and the need to optimize health system performance to support client health outcomes influence the decision to incorporate a specific restricted activity into a registrant's practice (College of Registered Nurses of Nova Scotia, 2015).

When determining whether to incorporate a restricted activity into a registrant's practice, the following factors must be considered:

- authorization to perform the restricted activity
- needs of the client
- context of care, including the client's acuity/stability/complexity
- service delivery model
- registrant's knowledge and **COMPETENCE**
- availability of other health professionals in the practice setting
- continuity of care within the practice setting

Assessment of these factors and the guidelines within this document provides assistance to registrants, employers, and other health professionals in determining if it is reasonable for a registrant to perform the restricted activity.

This document builds on the following College and Association of Registered Nurses of Alberta (CARNA) documents that further describe the scope of nursing practice for the public, registrants, and other stakeholders:

- *Code of Ethics for Registered Nurses* (Canadian Nurses Association, 2017)
- **COMPETENCIES** for *Registered Nurse Prescribing Schedule 1 Drugs and Ordering Diagnostic Tests* (2019)
- *Practice Standards for Regulated Members* (2013)
- *Registered Nurse Prescribing Schedule 1 Drugs and Ordering Diagnostic Tests: Requirements and Standards* (2019)
- *Restricted Activities Standards* (2019)
- *Scope of Practice for Nurse Practitioners* (2017)
- *Scope of Practice for Registered Nurses* (2011)

All CARNA documents are on the CARNA website at nurses.ab.ca.

¹ Words or phrases displayed in **BOLD CAPITALS** upon first mention are defined in the glossary.

Legislation

The legislated scope of practice for registrants is outlined in schedule 24 of the *Health Professions Act* (HPA). Schedule 24 defines the specific roles and responsibilities of registrants (Appendix A). The *Registered Nurses Profession Regulation* (2005) authorizes the restricted activities which registrants may perform (Appendix B).

However, the authorization of restricted activities in the regulation **does not mean that a registrant can perform any restricted activity in any situation, in any clinical practice area.**

Guidelines for Determining if a Restricted Activity Should Be Incorporated into Practice

Specific restricted activities may be incorporated into a registrant's practice if authorized by the *Registered Nurses Profession Regulation* and using these guidelines to make an informed decision.

A registrant should consider incorporating a restricted activity into their practice based on the needs of their client, the need to support continuity of care, the support of their employer, and **not** for the desire for convenience of other health-care professionals.

Guideline 1: Assessing client need, intent, and purpose of the restricted activity

Client health needs and therapeutic outcomes are the primary reasons to determine whether a registrant should perform a specific restricted activity.

The decision whether a registrant performs a specific restricted activity must be collaborative. The registrant, their employer(s), and other health professionals in the practice setting, if their participation in the restricted activity is required, should be involved in and agree with the decision.

Consider the following factors when assessing client need, intent, and purpose of the restricted activity:

- The client would benefit from a registrant performing the restricted activity.
- Consequences or potential unexpected outcomes to the client's care if a registrant performs the restricted activity.
- Gaps in the client's care if the registrant does not perform the restricted activity.
- Consultation with other health professionals if a registrant performs the restricted activity.
- Continuity of care in the practice setting is supported if a registrant performs the restricted activity.

Guideline 2: Knowledge, skill, and competence to perform the restricted activity safely

A registrant attains and maintains their competence to perform the specific restricted activity.

Competence requires the integration of knowledge, skills, and judgment in order for a registrant to practice safely. When deciding whether to incorporate a specific restricted activity into a registrant's practice, an important factor to consider is the opportunity for the registrant to develop and maintain competence. Competence is more than the ability to perform the restricted activity, it also includes assessment, decision-making, critical judgment in the clinical situation, and the monitoring the client's response to the restricted activity.

Registrants and employers share the responsibility to perform ongoing evaluation of the need for and the performance of all restricted activities. This ongoing evaluation also includes the competence of the health professionals involved.

Registrants must

- identify their own learning needs with respect to the restricted activity;
- participate in orientation and/or staff development programs based on identified learning needs related to the restricted activity;
- complete learning activities to attain and maintain competence to perform the restricted activity; and
- seek out necessary resources to attain and maintain their competence to perform the restricted activities required to meet the client's health needs in the practice setting.

Guideline 3: Identifying and establishing practice setting supports to facilitate safe and competent performance of the restricted activity

Developing and implementing evidence-based practice setting support is critical for registrants to perform the specific restricted activity safely and competently.

Practice setting supports can help identify parameters and limitations of performing a specific restricted activity, and should be safe, consistent with therapeutic client outcomes, and align with best practices. An employer may choose to permit a narrower scope of activities than the legislated scope of practice of a registrant. The registrant must respect the limits imposed by an employer and must not perform the restricted activity.

In any practice setting, registrants have the professional obligation to question policies and procedures inconsistent with therapeutic client outcomes, best practices, and safety standards.

If the performance of a particular restricted activity is not consistent with therapeutic client outcomes, best practices and/or safety standards, registrants have the professional responsibility to

- communicate their concern to the employer; and
- ensure all concerns are addressed before performing the restricted activity.

For questions or assistance determining whether to incorporate a restricted activity into a registrant's practice, contact a CARNA Policy and Practice Consultant at 1-800-252-9392 ext. 504 or email practice@nurses.ab.ca.

Decision-making Framework

**Is the restricted activity within the registrant's legislated scope of practice?
If yes, ask the following questions. All must be true to continue and incorporate the
restricted activity into the practice of the registrant.**

Assessment

Will the restricted activity address the health-care needs of the client?

Is the registrant the right provider to meet the client's needs? Is there another health-care professional who is reasonably available and whose knowledge, skill and experience is more appropriate for performing the restricted activity?

Does the restricted activity represent a complete intervention, or is it part of a plan of care/intervention that requires the participation of other health-care professionals? Are there processes in place to ensure this participation?

Competence

Has the registrant received the necessary education/training?
Is the restricted activity part of entry-level competencies or is additional education/training required?

Does the registrant have the skills to perform the restricted activity autonomously?

Practice Setting

Is the restricted activity within the role of the registrant's role within their practice setting?

Is the restricted activity appropriate to the practice setting?

Does the registrant have available facilities and equipment, **CLINICAL SUPPORT TOOLS** (where required), and policies?

Is performance of the restricted activity consistent with best practice?

**If the answer to any of the above was "no",
further planning and consultation are needed.**

Questions? Contact a CRNA Policy & Practice Consultant at 1 (800) 252-9392 Ext 504

Specific Clinical Examples

The *Health Professions Act* recognizes that health professionals have overlapping scopes of practice as several health professionals have authority to perform the same restricted activity. The context of the practice situation determines the extent to which a health professional will practice within their optimized scope and incorporate the restricted activity into their practice. The following clinical situations provide guidance for registrants and their employers when incorporating a specific restricted activity into practice.

Suturing

The *Registered Nurses Profession Regulation* authorizes registrants to perform the following restricted activity:

- 15 (1)(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 below the dermis or the mucous membrane.

There are instances in practice where registrants might engage in approximating the edges of a wound using sterile suture material and a needle, provided they follow and meet the expectations outlined in the *Restricted Activities Standards* (2019).

Performance of this restricted activity by a registrant requires

- education beyond foundational knowledge and is applied to this restricted activity being incorporated into their practice;
 - for example, the registrant may discuss with a clinical nurse educator regarding any learning modules or preceptorship opportunities;
- development of practice setting support to facilitate the practice and identify parameters and limitations; and
- quality assurance mechanisms to evaluate and support safe, competent practice.

Pessary management

The *Registered Nurses Profession Regulation* authorizes registrants to perform the following restricted activity:

- 15 (1)(b)** to insert or remove instruments, devices, fingers or hands
(v) beyond the labia majora

There are instances in practice where registrants might engage in the placement and monitoring of a vaginal device for management of pelvic floor/urogynecological wellness,

provided they follow and meet the expectations outlined in the *Restricted Activities Standards* (2019).

Performance of this restricted activity by a registrant requires

- education beyond foundational knowledge and is applied to this restricted activity being incorporated into their practice;
 - For example, a registrant may seek external learning opportunities on urogynecological wellness;
- development of practice setting support to facilitate the practice and identify parameters and limitations; and
- quality assurance mechanisms to evaluate and support safe, competent practice.

Ordering ionizing radiation by a Registered Nurse (RN)

The *Registered Nurses Profession Regulation* authorizes registrants to perform the following restricted activity:

15 (2.1) A regulated member registered on the registered nurse register may, within the practice of registered nursing perform the restricted activity of ordering any form of ionizing radiation in medical radiography.

The restricted activity of RNs ordering any form of ionizing radiation in medical radiography can provide timely access to meet client needs. RNs may order ionizing radiation in medical radiography, as outlined in a [CLINICAL SUPPORT TOOL](#), when appropriate for a client in a specific situation. Such as

- verification/confirmation of correct placement of devices (chest x-ray to confirm placement of a PICC line, abdominal x-ray to confirm placement of a nasointestinal feeding tube); and
- identification or monitoring of a health problem (chest x-ray for TB screening).

Registered nurses must use a clinical support tool to guide their decision to order medical radiography. It is outside of the RN scope of practice to interpret medical radiography results. The clinical support tool used by the RN should outline which regulated health-care professional will assume responsibility for the interpretation of the results and discuss with the RN follow up of the tests that the RN has ordered as outlined in the clinical support tool.

Registrants performing this restricted activity must follow and meet the expectations outlined in the *Restricted Activities Standards* (2019).

Nurse Practitioner (NP) setting or resetting a bone fracture

The *Registered Nurses Profession Regulation* authorizes NPs to perform the following restricted activity in accordance with the *Restricted Activities Standards* (2019):

15(5) (a) to set or reset a fracture of a bone

Any manipulation of a fracture beyond casting or simple alignment of a limb requires additional knowledge and skill. Before NPs incorporate this restricted activity into their practice, they require additional education and practise, beyond foundational knowledge. This additional education may include a preceptorship to provide NPs with the opportunity to consolidate knowledge, skills, and judgment specific to set or reset a fracture of a bone.

Performance of this restricted activity by an NP requires

- education beyond foundational knowledge and is applied to this restricted activity being incorporated into their practice;
 - For example, an NP working in urgent care could gain competence through preceptorship with a physician or NP colleague in their practice setting;
- development of practice setting support to facilitate the practice and identify parameters and limitations; and
- quality assurance mechanisms to evaluate and support safe, competent practice

Glossary

CLIENT – The term client(s) can refer to patients, residents, families, groups, communities, and population (CARNA, 2013).

CLINICAL SUPPORT TOOL – An evidence-informed tool used by the practice setting to guide decisions related to prescribing and ordering of diagnostic test and ordering of medical radiography. The clinical support tool may be in the form of a protocol, algorithm, or clinical practice guideline.

COMPETENCE – The integrated knowledge, skills, judgment, and attributes required of a registrant to practise safely and ethically in a designated role and setting (CARNA, 2019).

COMPETENCIES – The observable ability of a registered nurse that integrates the knowledge, skills, abilities, and judgment required to practise nursing safely and ethically (CARNA, 2019).

REGISTRANTS – CARNA registrants include registered nurses, graduate nurses, certified graduate nurses, nurse practitioners, graduate nursepractitioners, and courtesy permit holders.

RESTRICTED ACTIVITY – The restricted activities identified in Schedule 7.1 of the *Government Organization Act* provide a legal framework for authorization by a regulatory college of those restricted activities their registrants can perform.

References

Canadian Nurses Association. (2017). *Code of ethics for registered nurses*. Ottawa, ON: Author.

College and Association of Registered Nurses of Alberta. (2019). *Competencies for registered nurse prescribing schedule 1 drugs and ordering diagnostic tests*. Edmonton, AB: Author.

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College of Registered Nurses of Nova Scotia. (2015). *Adding new interventions to the registered nurse role*. Halifax, NS: Author.

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

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

Registered Nurses Profession Regulation, Alta. Reg. 232/2005.

Appendix A: Legislated Scope of Practice Statement for the Profession of Registered Nurses

The *Health Professions Act* was developed to regulate health professions using a model that allows for non-exclusive, overlapping scopes of practice. No single profession has exclusive ownership of a specific skill or health service, and different professions may provide the same health services.

Schedule 24, Section 3 of the HPA provides the following legislated scope of practice statement for the profession of registered nurses:

- (3)** In their practice, registered nurses do one or more of the following:
- (a)** based on an ethic of caring and the goals and circumstances of those receiving nursing services, registered nurses apply nursing knowledge, skill and judgment to
 - (i)** assist individuals, families, groups and communities to achieve their optimal physical, emotional, mental and spiritual health and well-being,
 - (ii)** assess, diagnose and provide treatment and interventions and make referrals,
 - (iii)** prevent or treat injury and illness,
 - (iv)** teach, counsel and advocate to enhance health and well-being,
 - (v)** coordinate, supervise, monitor and evaluate the provision of health services,
 - (vi)** teach nursing theory and practice,
 - (vii)** manage, administer and allocate resources related to health services, and
 - (viii)** engage in research related to health and the practice of nursing, and
 - (b)** provide restricted activities authorized by the regulations

Appendix B: Restricted Activities Authorized by the Registered Nurses Profession Regulation

Section 15 of the *Registered Nurses Profession Regulation (2005)* identifies restricted activities that registrants are authorized to perform.

Restrictions

- 14.1(1)** Despite sections 15 to 18, regulated members must restrict themselves in performing restricted activities to those activities that they are competent to perform and to those that are appropriate to their area of practice and the procedures being performed.
- (2)** A regulated member who performs a restricted activity must do so in accordance with the Standards of Practice.
- (3)** A regulated member or other person shall not supervise the performance of a restricted activity unless the registrant or person is authorized or permitted to perform the restricted activity without being supervised.
- (4)** A regulated member or other person who supervises the performance of a restricted activity under sections 15 to 18 must do so in accordance with the Standards of Practice.
- 15(1)** A regulated member registered on any register may, within the practice of registered nursing, perform the following 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 below the dermis or the mucous membrane;
 - (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,

(2) Despite subsection (1)(e), a regulated member registered on any register performing the restricted activity described in subsection (1)(e) shall not distribute, trade or barter for money or valuable consideration, or keep for sale or offer for sale, a Schedule 1 drug or a Schedule 2 drug but may distribute or give away a Schedule 1 drug or a Schedule 2 drug without expectation or hope of compensation or reward.

(2.1) A regulated member registered on the registered nurse register may, within the practice of registered nursing perform the restricted activity of ordering any form of ionizing radiation in medical radiography.

(2.2) A regulated member registered on the registered nurse register who meets the requirements approved by the Council and who has been authorized to do so by the Registrar may, within the practice of registered nursing, perform the restricted activity of prescribing a Schedule 1 drug.

(4) A regulated member registered on the registered nurse register or on the certified graduate nurse register may, within the practice of registered nursing, perform the restricted activity of applying non-ionizing radiation in ultrasound imaging to a fetus, but only under the supervision of a person who provides health services and who is authorized by this Regulation or another regulation under the Act or by another enactment to apply ultrasound to a fetus.

(6) In this section,

(a) Schedule 1 drug means a Schedule 1 drug within the meaning of Part 4 of the *Pharmacy and Drug Act*;

(b) Schedule 2 drug means a Schedule 2 drug within the meaning of Part 4 of the *Pharmacy and Drug Act*.