

# *What is my* **Scope of Practice?**



By SUSANNE PRIEST

**B**eing able to describe what it means to be a registered nurse (RN) is often difficult because nursing practice cannot be reduced to a list of tasks or activities.

The complex nature in decision-making for the coordination of nursing care and the competencies required to perform clinical tasks can be difficult to articulate. There are also many domains of nursing such as administration, education, policy and research, which add to the complexity of describing the scope of an RN. Additionally, the over-lapping scope of practice

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that RNs have with other care providers can create a grey zone of being able to identify where the role of the RN starts and stops within the healthcare team. This document attempts to clarify what is meant by the term ‘scope of practice’ in relation to RN practice in New Brunswick (NB).

Nursing competency is described as the combination of the RN’s knowledge, skills, values, beliefs, and professional experience acquired as a nurse—an integration of the RN’s knowledge, thoughts and judgment, including professional and personal attributes and values (Fukada, 2018; Nurses Association of New Brunswick, 2019a). The *Nurses Act* describes nursing as: “... the practice of nursing and includes the nursing assessment and treatment of human responses to actual or potential health problems and the nursing supervision thereof” (p. 3). This definition is broad and is founded on the following concepts:

- RNs are educated according to education standards at the baccalaureate level<sup>1</sup>;
- graduating nursing students are from an approved school of nursing and meet the *Entry Level Competencies for Registered Nurses in New Brunswick*; and
- RNs practice according to professional practice standards as required by the NANB.

In the *Entry-Level Competencies for Registered Nurses in New Brunswick* (2019a) and the *Standards of Practice for Registered Nurses* (2019b), scope of practice is defined as activities that RNs are educated and authorized to perform, as set out in legislation and described by regulatory standards. To break this concept down, the role of the RN is an evolving one that is impacted by the client being served, the competence of the individual RN, the employer policies, the nursing regulatory standards, and legislation at a provincial and federal level.

It is important to note that the scope of practice for the profession of nursing is broader than the scope of practice of an individual RN. The individual scope of RN practice will be different depending on the RN’s competence gained from formal and informal education, skills acquired through nursing experience in various domains, and services provided to diverse aggregate populations.

Since RNs are educated as generalists, their scope of practice is expected to evolve through professional practice and continuing education. Furthermore, RNs may be expected to perform post-entry level procedures (also known as advanced nursing procedures), as facilitated in the employer setting. Please refer to *Examining Requests for Post-Entry Level Procedures* (NANB, 2013) to learn more about post-entry level competencies and procedures.

Advanced Practice Nurses (APNs), such as clinical nurse specialists (CNS) or nurse practitioners (NP), require additional formal education and are RNs with expanded knowledge, competency, accountability and responsibility. The *Position Statement: Advanced Practice Nursing* (2018), provides detailed information on the role of APNs, including their scope of practice, in New Brunswick.

RNs are expected to know the role of all healthcare team members, including their own role and the contributions they make to the team. Although it can be difficult to describe what being an RN entails, reflective practice and keeping abreast with professional nursing literature will provide relevant insight on how to describe the complex decision-making and the diverse nursing activities that RNs perform.

The healthcare team, key decision makers within institutions, government leaders and the public need to understand the RN scope of practice and the contributions that RNs make within the healthcare system. Full implementation of RN scope of practice is associated with employer policies that facilitate RN autonomy, enabling the RN to work to their full scope of practice (Ganz, Toren & Fadlon, 2016). When the scope of practice of each healthcare professional is understood, there will be increased team collaboration because the limits and strengths of each provider will be known.

### References

- Fukada M. (2018). Nursing Competency: Definition, Structure and Development. *Yonago acta medica*, 61(1), 1-7.
- Ganz, F., Toren, O. & Fadlon, Y. (2016). Factors Associated With Full Implementation of Scope of Practice. *Journal of Nursing Scholarship*, 48(3).
- Nurses Association of New Brunswick. (2002). *Nurses Act*. Fredericton: Author.
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- Nurses Association of New Brunswick. (2018). *Position Statement: Advanced Practice Nursing*. Fredericton: Author.
- Nurses Association of New Brunswick. (2019a). *Entry-Level Competencies for Registered Nurses in New Brunswick*. Fredericton: Author.
- Nurses Association of New Brunswick. (2019b). *Standards of practice for registered nurses*. Fredericton: Author.

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<sup>1</sup> means programs approved by the Board of NANB and includes such nursing education programs as may be required as qualifications for the practice of nursing as outlined in the Nurses Act (NANB, 2002).

# Can I do that?

## A Decision Making Tool to Help Define Nursing Scope of Practice

1

Is the role or activity consistent with the RN or NP scope of practice, legislation, regulation and professional standards?



2

Is the RN or NP supported to perform the role or activity through employer policy and/or job description?



3

Does the RN or NP have the competencies needed to perform the role or activity?



The RN or NP may perform the activity, intervention, or role in accordance with standards of safe nursing care.

\*The organization of this resource is adapted from the College of Licensed Practical Nurses of Alberta, LPN Practice Decision-Making Tool, 2019.

**T**his tool is meant to be used in determining safe and authorized practice for registered nurses (RNs) and nurse practitioners (NPs), in all practice settings. The application of this algorithm is shaped by legislation, the needs of the client, the practice environment, and individual RN or NP competence. In all areas of practice, RNs and NPs are accountable to their NANB standards of practice and the *CNA Code of Ethics*. Key considerations (page 19) provide guidance to determine if a specific role or activity is appropriate for an individual RN or NP to perform.

Begin with Question 1. Answering 'Yes' to a question allows you to proceed to the next question. Answering 'No' to any question means that practice may not be appropriate at this time and additional consultation with NANB may be required. If 'Yes' is selected for all questions in the tool, then the role or activity is within your scope of practice.

### QUESTION 1

**Is the role or activity consistent with the RN or NP scope of practice, legislation, regulation and professional standards?**

RN and NP practice is outlined by NANB in the entry-level competencies and standards of practice for both RNs and NPs. These documents inform RN and NP practice in New Brunswick and can be found on the NANB website.

You are also accountable to practice under relevant provincial and federal legislation, such as the *Nurses Act* and the *Personal Health Information Privacy and Access Act*. Each RN and NP is responsible for determining which legislation applies to their nursing practice.

If you have additional questions, please review NANB's Jurisprudence Module (an online review of relevant legislation, standards and policies impacting nursing practice in New Brunswick).

### QUESTION 2

**Is the RN or NP supported to perform the role or activity through employer policy and/or job description?**

RNs and NPs must work within the role defined by employer policy and/or job description. The roles and responsibili-

ties of RNs and NPs are specific to the practice environment. RNs and NPs must also ensure the necessary clinical supports are available; this includes but is not limited to: guidelines, directives and/or policies to guide practice; proper equipment and/or supplies to safely perform the activity; and appropriate supervision as required. The RN or NP must know which role or activity within their practice requires direct or indirect supervision (or guidance).

- **Direct** means that an RN, NP, or physician is physically present at the point of care.
- **Indirect** means that an RN, NP or physician is available for consultation and guidance, but is not physically present at the point of care. The person providing indirect supervision is *readily available* and can provide assistance when needed.

The practice environment may vary based on care requirements of the clients, the delivery model of care, and staff mix. If the employer does not support the role or activity, you can advocate for and potentially assist in the development of supporting policies.

Further questions for clarification include:

- Is the procedure or activity within your documented role description?
- Do organizational policies support an RN or NP performing the procedure or activity?
- Are the necessary resources available to support the RN or NP before, during and after the procedure or activity?
- Will resources continue to be available when performing future procedures or activities?

### QUESTION 3

**Does the RN or NP have the competencies needed to perform the role or activity?**

Individual scope of practice is unique and specific to each RN and NP. Prior to performing any procedure or activity, nurses are accountable for reflecting on their individual scope and for consider-

ing whether they have the adequate knowledge, skill, and judgment to perform the activity or procedure safely and competently. Additional competencies may be gained through experience, on-the-job training, post-basic education and/or certification. NANB provides further guidance in this decision-making process in *Examining Requests for Post Entry-Level Procedures*.

Self-reflecting questions will help the RN or NP determine their individual scope:

- Am I the most appropriate care provider?
- Do I have the knowledge, skill and judgment to: (a) Assess the appropriateness of performing the procedure? (b) Perform the procedure? (c) Manage the patient before, during, and after the procedure?
- How will I obtain and maintain my competence?

RNs and NPs requiring additional education and training to safely perform a role or activity within their practice environment, should discuss this limitation with their employer and seek opportunities for educational support. Questions about a competency not reflected in the documents may be directed to the NANB for further discussion.

If you have further questions, please call to speak to a nurse consultant at NANB at (506) 458-8731 or send a query to [nanb@nanb.nb.ca](mailto:nanb@nanb.nb.ca).

### References

*Entry-Level Competencies (ELCs) for the Practice of Registered Nurses in New Brunswick*

*Standards of Practice for Registered Nurses*

*Entry-Level Competencies for Nurse Practitioners*

*Standards for the Practice of Primary Health Care Nurse Practitioners*