

# COMPETENCY PROFILE

For Licensed Practical Nurses

Fifth Edition - February 2020

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#### **Competency Profile Overview**

The College of Licensed Practical Nurses of Alberta (CLPNA) has the legislative authority and responsibility, through the Health Professions Act (2000) and Licensed Practical Nurses Profession Regulation, to regulate the practice of practical nursing in Alberta in a manner that protects and serves the public interest. CLPNA is responsible to provide direction to and regulate the Licensed Practical Nurse (LPN) profession by establishing, maintaining, and enforcing standards for education, entry to practice requirements, registration, conduct, and continuing competence expectations of its members.

The Competency Profile outlines the knowledge, skills, attitudes, behaviors, and judgment required of the LPN profession in Alberta. The document also guides practical nurse curriculum development and supports employers to understand full scope of practice for determining LPN practice in their care settings.

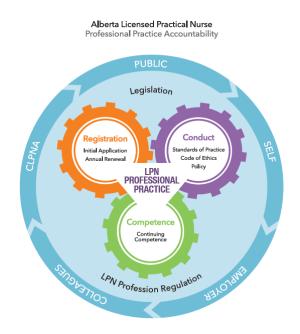
Individual LPNs are not expected to possess all competencies outlined within this document and the degree of proficiency in each competency area may vary. Individual LPN competence can be specific to the area of practice, nursing experience, continuing professional development, and role and responsibility within the practice setting.

Upon graduation from an approved practical nurse program, successful completion of the Canadian Practical Nurse Registration Examination (CPNRE), and registration with CLPNA, new graduates are considered entry-level practitioners. LPNs further their expertise in practice over the span of their careers.

The competencies outlined in this document reflect the current legislated scope of practice for LPNs in Alberta and may be attained through, (1) *Entry-level* practical nurse education; (2) *Post entry-level* informal and formal education, experience, employer training, and certification; or (3) *Advanced authorization*, CLPNA approved education and training.

Shaded areas within this document indicate post entry-level and advanced practice competencies.

LPNs have the responsibility to manage their professional practice and are accountable to the public, their employer, colleagues, the LPN profession, CLPNA, and themselves.



#### **Using the Profile**

The Competency Profile is meant to be a dynamic document that is revised to reflect changes within LPN practice as they occur. This 5<sup>th</sup> Edition reflects LPN education and current scope of practice occurring in Alberta. Competency sections are not intended to be standalone, they are cumulative. An example of this would be the *Major Competency* A-1: Critical Thinking. Although critical thinking competencies are in Band A, it is expected that the LPN would apply these competencies to all areas of practice.

The Profile broadly defines the scope of practice of LPNs in Alberta and provides a foundation for the College of Licensed Practical Nurses of Alberta's Continuing Competence Program by providing a reference for LPN ongoing assessment of individual competence. The document is framed using *Major Competency* (subject area of practice), *Competency* (focused area of practice), and *Competency Statements* (specific competency indicators within the focused area of practice), to provide ease of reference.

Please note, a colon [:] appearing at the end of a *Competency Statement* indicates "such as" examples of fulfillment of the competency and is not to be viewed as a conclusive list of indicators of competence.

#### **Acknowledgement**

The College of Licensed Practical Nurses of Alberta would like to acknowledge individuals across the health system who shared their time, expertise, and commitment, contributing to the 5<sup>th</sup> Edition of the Competency Profile to guide LPN practice in the province.

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#### A: Nursing Knowledge

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

### Competency **A-1: Critical Thinking**

- A-1-1 Demonstrate knowledge and application of critical thinking supported with evidence-informed inquiry in nursing practice within all settings of healthcare delivery across the continuum of care.
- A-1-2 Demonstrate knowledge of how critical thinking and evidence-informed inquiry influence clinical judgment and decision making.
- A-1-3 Demonstrate application of evidence-informed inquiry to expand critical thinking and decision making:
  - actions
  - assumptions
  - beliefs

- conclusions
- ideas
- principles
- A-1-4 Demonstrate knowledge and ability to apply critical thinking and evidence-informed inquiry throughout the decision-making process:
  - identify facts
  - assess risk
  - analyze best available evidence
- clarify and challenge assumptions
- identify and analyze the context
- identify anticipated outcome

#### Competency

#### A-2: Clinical Judgment and Decision Making

- A-2-1 Demonstrate knowledge of the importance of clinical judgment and decision making in nursing practice and interpersonal relationships within all settings of healthcare delivery across the continuum of care.
- A-2-2 Demonstrate knowledge and ability to integrate evidence-informed practice in clinical judgment and decision making:
  - identify concern
  - reflect on prior knowledge, experience, and intuition
  - assess potential for inaccuracies
  - establish and implement a plan to achieve desired outcomes
- evaluate process and outcomes
- incorporate changes if required
- contribute to policy and procedure development
- assess impact of knowledge gained on professional practice
- A-2-3 Demonstrate knowledge and ability to provide evidence-informed, person-centered care in all settings of healthcare delivery across the continuum of care:
  - patient engagement
  - holistic assessment
  - informed consent
  - patient needs, values, and preferences
- collaborative partnerships
- empowering communications
- health advocacy, support, and empowerment
- access and autonomy
- A-2-4 Demonstrate knowledge and understanding of the *Calls to Action of the Truth and Reconciliation Commission of Canada*, encompassing advocacy and collaboration of Indigenous health knowledge and healing practices.
- A-2-5 Demonstrate knowledge and ability to identify the relationship between person-centered care and health outcomes:
  - anxiety reduction
  - satisfaction with health outcomes
  - engagement and empowerment
- rights, needs, goals, and preferences
- satisfaction with healthcare system
- self-management and self-efficacy
- A-2-6 Demonstrate knowledge and ability to communicate and collaborate with inter-professional team as necessary throughout the decision-making process.

#### Competency **A-3: Time Management**

Competency Statement - A Licensed Practical Nurse will:

#### A-3-1 Demonstrate knowledge and ability to manage time effectively.

#### A-3-2 Demonstrate knowledge and ability to prioritize and manage patient care according to:

- emergent immediate threat to survival or safety
- urgent care needs requiring immediate intervention
- less urgent care needs requiring non-immediate interventions
- non-urgent anticipated future care need

### A-3-3 Demonstrate knowledge and ability to seek guidance and assistance from inter-professional team as necessary.

#### A-3-4 Demonstrate ability to respect inter-professional team in decisions of time management:

- arrive for work on time
- collaborate in care delivery
- maintain professionalism in practice
- limit personal activities to personal time
- manage breaks effectively
- remain until transfer of care is complete to avoid abandonment of care
- adapt to unexpected change

#### A-3-5 Demonstrate knowledge and ability to perform admission and discharge procedures in a timely and efficient manner:

- complete patient assessment and history
- medication reconciliation
- advance care planning, Goals of Care
- processing orders
- managing transfers and referrals
- health teaching and coaching
- documenting and reporting
- emotional support
- advocating for patient care needs
- coordinating care supports

### Competency **A-4: Health Teaching and Coaching**

Competency Statement - A Licensed Practical Nurse will:

- A-4-1 Demonstrate knowledge of factors that influence teaching and learning:
  - access to resources and technology
  - technology capability
  - determinants of health
  - individual health literacy
  - learning styles and preferences
- A-4-2 Demonstrate knowledge and ability to apply health teaching and coaching principles to achieve effective learning:
  - goal setting

positive psychology

motivational practices

- health promotion
- A-4-3 Demonstrate ability to apply nursing knowledge, evidence informed practice, and clinical expertise in health teaching and coaching.
- A-4-4 Demonstrate knowledge and ability to develop and deliver an individualized teaching and coaching plan to foster patient decision making and navigation of the healthcare system.
- A-4-5 Demonstrate knowledge and ability to evaluate teaching, coaching, and learning outcomes.

#### Competency

#### A-5: Anatomy and Physiology

- A-5-1 Identify the structures and functions of the body.
- A-5-2 Describe the anatomical organization of the body.
- A-5-3 Describe the cellular chemistry and organization of the body.
- A-5-4 Describe cellular functions.
- A-5-5 Explain how cells are organized into tissue, organs, and systems of the body.
- A-5-6 Identify and explain the structure and function of the body systems:
  - cardiovascular
  - circulatory
  - digestive
  - endocrine
  - genitourinary
  - immune

- integumentary
- lymphatic
- musculoskeletal
- nervous and sensory
- reproductive
- respiratory
- A-5-7 Identify and explain the components of blood and blood products.
- A-5-8 Describe the life processes of:
  - homeostasis
  - metabolism
  - reproduction

### Competency **A-6: Microbiology**

- A-6-1 Explain characteristics of micro-organisms and their role in the transmission of disease.
- A-6-2 Describe and differentiate pathogens and non-pathogens.
- A-6-3 Describe and differentiate bacteria, viruses, and fungi.
- A-6-4 Describe the normal micro-organisms within the human body.
- A-6-5 Describe conditions for growth and transferability of micro-organisms.
- A-6-6 Explain the concept of asepsis.
- A-6-7 Explain the principles of disease prevention and health promotion.
- A-6-8 Describe the concept and practice of infection prevention and control.

### Competency A-7: Pathophysiology

- A-7-1 Define pathophysiology as the science of physiological and psychological disease processes within the human body.
- A-7-2 Identify and describe pathophysiology processes:
  - acute conditions/disorders
- etiology
- chronic conditions/disorders
- manifestations

- complications
- A-7-3 Identify the etiology, pathophysiology, and complications of common health problems for all body systems.
- A-7-4 Describe body responses to disease:
  - carcinogenesis
    - cellular/tissue/organ/system level
  - genetic
  - immunity

- inflammation
- psychological
- stress
- A-7-5 Describe the processes of inflammation, infection, and healing.
- A-7-6 Explain types of trauma and their pathophysiological affect:
  - addictions
  - burns
  - fractures
  - hemorrhage

- mental health
- multisystem failure
- neurological
- surgical
- A-7-7 Explain common medical management in relation to pharmacology, surgery, anesthesia, and treatments.
- A-7-8 Describe diagnostic tests commonly used in healthcare.

### Competency A-8: Medical Language and Terminology

- A-8-1 Identify meanings of common prefixes, suffixes, and root words used in reporting and documenting.
- A-8-2 Identify common abbreviations used in healthcare.
- A-8-3 Use appropriate medical language and terminology in reporting and documentation to support patient safety and continuity of care.
- A-8-4 Follow employer requirements regarding use of abbreviations and medical terminology.

### Competency A-9: Human Growth and Development

- A-9-1 Explain theories of human growth and development across the life span.
- A-9-2 Describe the stages of human growth and development across the life span.
- A-9-3 Describe significant physical, psychological, social, cognitive, moral, spiritual, and cultural developments across the life span.
- A-9-4 Describe how factors of environment, genetics, culture, lifestyle, religion, spirituality, and maturation influence growth and development across the life span.
- A-9-5 Describe the process of learning associated to the stages of human growth and development across the lifespan.
- A-9-6 Describe the stages of dying, death and the grieving process across the lifespan.

#### Competency A-10: Nutrition and Health

- A-10-1 Describe the importance of nutrition to growth and development, health and recovery.
- A-10-2 Identify the functions, major sources, and daily requirements for common nutrients:
  - carbohydrate
  - fat
  - fiber

- minerals
- protein
- vitamins
- A-10-3 Identify the Canada Food Guide and/or special dietary requirements for healthy and chronic conditions across the life span.
- A-10-4 Identify factors that affect nutrition and hydration.
- A-10-5 Identify the indicators of adequate and inadequate nutrition and hydration.
- A-10-6 Describe methods to assess nutrition and hydration status:
  - body mass index
  - diet history
  - food allergies
  - general appearance
  - height and weight
  - intake/output

- lab values
- perception of body image
- skin turgor
- swallowing
- waist circumference
- A-10-7 Describe the purpose and elements of therapeutic diets and diet restrictions.
- A-10-8 Identify when to consult with a dietician or nutritionist.

### Competency **A-11: Pharmacology**

- A-11-1 Define pharmacology and the related terminology.
- A-11-2 Describe the process of pharmacokinetics and pharmacodynamics across the life span.
- A-11-3 Identify classifications, generic, and trade names of drugs and medications and appropriate pharmacological resources.
- A-11-4 Describe the principles of pharmacology:
  - assessment
  - controlled substances
  - documentation

- policy and procedures
- safe handling (storage, transport, disposal)
- A-11-5 Identify the common routes of medication administration.
- A-11-6 Recognize and interpret low, high, and, expected lab values related to pharmacology.
- A-11-7 Describe the effects of drugs and medications:
  - adverse, idiosyncratic, and paradoxical reaction
  - allergic reaction
  - body system impact
  - drug interactions

- side effects
- synergistic effects (additive and antagonist)
- therapeutic effects
- desired effect
- A-11-8 Describe the signs, symptoms and treatment of anaphylaxis.
- A-11-9 Identify common systems of measurement in medication administration.
- A-11-10 Identify appropriate formulas to calculate medication dosages.
- A-11-11 Identify the difference between intentional and unintentional drug use and dependence.
- A-11-12 Identify the difference between physiological and psychological dependence.
- A-11-13 Identify common drug and medication legislation and standards.
- A-11-14 Identify roles and responsibilities of inter-professional team related to pharmacology.

#### **Major Competency**

#### **A: Nursing Knowledge**

#### Competency

#### A-12: Social Sciences and Humanities

Competency Statement - A Licensed Practical Nurse will:

### A-12-1 Describe fundamentals of nursing knowledge that encompass human caring related to arts, sciences, and humanitarianism:

- experiences
- phenomena
- processes

#### A-12-2 Demonstrate foundations of English language and literacy:

- comprehension
- content
- grammar
- mechanics

- organization
- rhetorical analysis
- writing skill and style
- verbal communication

#### A-12-3 Identify effective communication strategies to engage with individuals, groups, and communities:

- interpersonal
- professional
- therapeutic
- A-12-4 Identify concepts of personal health and wellness related to individuals, groups and communities:
  - communicable disease control
  - immunization
  - mental health, addictions, and stress management
  - neglect, abuse, and violence
  - nutrition

- physical activity
- gender identity and sexuality
- family planning
- population health
- prevention and wellness
- A-12-5 Describe foundations of health and wellness of self and others across the lifespan:
  - environmental
  - psychological
  - physical

- social
- spiritual

A-12-6 Describe the social determinants of health and impact on individual health and wellness.

#### Competency **A-12: Social Sciences and Humanities**

Competency Statement - A Licensed Practical Nurse will:

### A-12-7 Explain foundations of psychology in relation to human behaviour and development across the life span:

- behavior
- cognition and intelligence
- conditioning and learning
- emotion and motivation
- memory

- perception
- sensation
- states of consciousness
- stress and health
- psychological health and illness

#### A-12-8 Explain and demonstrate advocacy through promotion of wellness behavior and practices for:

- individuals
- groups
- communities
- A-12-9 Demonstrate knowledge and ability to apply foundations of sociology to ethical nursing practice.

### A-12-10 Demonstrate knowledge of foundations of sociology related to social behavior and relationships across the lifespan:

- social
- biological
- emotional
- political

- cultural
- cognitive
- spiritual

#### Competency **A-13: Research and Best Practices**

- A-13-1 Demonstrate knowledge and ability to apply critical thinking and evidence-informed inquiry in validation and application of research:
  - reliability
  - ethics
  - bias

- methodology
- relevance
- credibility
- A-13-2 Demonstrate knowledge and ability to implement research and best practices into evidence informed practice.
- A-13-3 Demonstrate knowledge and ability to involve patients, families, and inter-professional team in formalized research.
- A-13-4 Demonstrate the ability to participate with research team to plan, conduct, and evaluate nursing research.

#### **B: Nursing Process**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

### Major Competency B: Nursing Process

#### Competency **B-1: Assessment**

Competency Statement - A Licensed Practical Nurse will:

#### B-1-1 Demonstrate knowledge and ability to assess patient considering multiple data sources:

- current status
- historical information
- objective data

- subjective data
- personal directives/Goals of Care
- B-1-2 Demonstrate knowledge and ability to identify primary and secondary sources of data.
- B-1-3 Demonstrate knowledge of data collection methods.
- B-1-4 Demonstrate knowledge and ability to relate assessment findings to nursing practice.
- B-1-5 Demonstrate knowledge and ability to perform a holistic health assessment:
  - psychosocial

o cultural

developmental

economic

o emotional

physiological

biological

o cognitive

environmental

o mental

o social

spiritual

functional

physical

- B-1-6 Demonstrate knowledge and ability to perform and interpret patient's:
  - vital signs
  - blood glucose level
  - elimination
  - nutrition/hydration
  - pain

- vaccination history/screening
- oxygenation
- allergies and sensitivities
- level of consciousness
- specimen collection

Major Competency
B: Nursing Process

Competency **B-2: Nursing Diagnosis** 

- B-2-1 Demonstrate knowledge related to domains addressed in development of nursing diagnosis.
- B-2-2 Demonstrate knowledge and ability to differentiate between a nursing diagnosis and a medical diagnosis.
- B-2-3 Demonstrate knowledge and ability to determine a nursing diagnosis using holistic health assessment:
  - identify actual and potential concerns and health issues
  - research and validate components of patient issues and concerns
  - apply nursing diagnosis framework
- B-2-4 Demonstrate knowledge and ability to communicate a nursing diagnosis with a patient, family, and others.
- B-2-5 Demonstrate knowledge and ability to document nursing diagnosis determining expected outcomes and developing plan of care.
- B-2-6 Demonstrate knowledge and ability to compare actual outcomes with expected outcomes and modify plan of care based on changing needs.

Major Competency	
B: Nursing Process	

Commission
Competency
· · ·
B-3: Planning
D-3. Halling

- B-3-1 Demonstrate knowledge and ability to collaborate with the patient throughout planning of care.
- B-3-2 Demonstrate knowledge and ability to develop a plan of care based on patient needs, priorities, expectations, and values.
- B-3-3 Demonstrate knowledge and ability to utilize best available data, resources, and evidence to develop a plan of care.
- B-3-4 Demonstrate knowledge and ability to anticipate potential barriers to achieving plan of care.

Major Competency	
B: Nursing Process	

Competency **B-4: Implementation** 

- B-4-1 Demonstrate knowledge and ability to collaborate with patient throughout implementation of plan of care.
- B-4-2 Demonstrate knowledge and ability to implement a plan of care based on patient needs, priorities, expectations, and values.
- B-4-3 Demonstrate knowledge and ability to utilize best available data, resources, and evidence throughout implementation of plan of care.
- B-4-4 Demonstrate knowledge and ability to anticipate potential barriers to implementation of plan of care.

Major Competency	
B: Nursing Process	

Competency	
B-5: Evaluation	

- B-5-1 Demonstrate knowledge and ability to collaborate with patient throughout evaluation of plan of care.
- B-5-2 Demonstrate knowledge and ability to evaluate plan of care based on:
  - patient needs, priorities, expectations, and values
- challenges and barriers
- patient progress and response to care
- actual and expected outcomes
- B-5-3 Demonstrate knowledge and ability to utilize best available data, resources, and evidence throughout evaluation of plan of care:
  - assess quality and effectiveness of care
  - measure level of care required
  - determine family and social support system
- B-5-4 Demonstrate knowledge and ability to revise plan of care based on continual evaluation.

#### C: Professionalism and Leadership

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

### Competency C-1: Legislation and Regulation

- C-1-1 Demonstrate knowledge and understanding of the Health Professions Act (HPA) and Licensed Practical Nurses Profession Regulation:
  - continuing competence
  - conduct process
  - protected titles

- registration and renewal
- restricted activities
- C-1-2 Demonstrate knowledge and understanding of the role of the College of Licensed Practical Nurses of Alberta:
  - establish, maintain, and enforce standards for education, registration, continuing competence, and discipline
  - establish, maintain, and enforce standards of practice and code of ethics
  - govern and regulate members in a manner that protects and serves the public
- C-1-3 Demonstrate knowledge and understanding of the differences in role and responsibilities of regulatory bodies, professional associations, and unions.

Competency

#### C-2: Licensed Practical Nurse Scope of Practice

Competency Statement - A Licensed Practical Nurse will:

- C-2-1 Demonstrate knowledge of scope of practice as defined in the Licensed Practical Nurses Profession Regulation and the Competency Profile for Licensed Practical Nurses.
- C-2-2 Demonstrate understanding of the Licensed Practical Nurse Practice Statement as defined under legislation:

In their practice, Licensed Practical Nurses do one of more of the following:

- (a) apply nursing knowledge, skill, and judgment to assess patients' needs,
- (b) provide nursing care for patients and families,
- (b.1) teach, manage, and conduct research into the science, techniques and practice of nursing, and,
- (c) provide restricted activities authorized the regulations."

Schedule 10 Health Professions Act, RSA 2000

- C-2-3 Demonstrate knowledge and understanding of restricted activities listed in the Government Organization Act, Schedule 7.1, and authorized for Licensed Practical Nurses in the Licensed Practical Nurses Profession Regulation.
- C-2-4 Demonstrate knowledge of practice policies, guidelines and additional governance documents that guide and interpret Licensed Practical Nurse scope of practice.

#### Competency

#### C-3: Professional Standards of Practice

Competency Statement - A Licensed Practical Nurse will:

### C-3-1 Demonstrate knowledge and understanding of the Standards of Practice for Licensed Practical Nurses in Canada (CCPNR, 2020):

**Standard 1**: Professional Accountability

and Responsibility

**Standard 3:** Public Protection through self-regulation

Standard 2: Evidence Informed Practice

Standard 4: Professional and Ethical Practice

#### C-3-2 Demonstrate knowledge and understanding of the four foundational principles of the Standards of Practice:

**Principle 1:** LPNS are self-regulating, accountable practitioners responsible to provide safe, competent, ethical nursing practice and to work collaboratively with clients and other health care providers.

**Principle 2:** LPN Practice is client centred and includes individuals, families, groups, and communities.

**Principle 3:** LPN standards provide the structure to support LPNs to meet the needs of the population in the Canadian healthcare system.

**Principle 4:** LPN practice requires individual leadership and professionalism as demonstrated through their commitment to continuing competence, continuing education, and safe ethical practice.

### C-3-3 Demonstrate knowledge and understanding of additional Standards of Practice that outline professional expectations for LPNs:

- Standards of Practice on Boundary Violations: Protecting Patients from Sexual Abuse and Sexual Misconduct (CLPNA, 2019)
- Standards of Practice on Restricted Activities and Advanced Practice (CLPNA, 2020)
- Reusable & Single-Use Medical Devices Standards (Government of Alberta, 2019)
- Decision-Making Standards for Nurses in the Supervision of HealthCare Aides (2010)

#### Competency C-4: Professional Ethics

Competency Statement - A Licensed Practical Nurse will:

### C-4-1 Demonstrate knowledge and understanding of the Code of Ethics for Licensed Practical Nurses in Canada (CCPNR, 2013):

Principle 1: Responsibility to the Public Principle 4: Responsibility to Colleagues Principle 2: Responsibilities to Clients Principle 5: Responsibility to Oneself

Principle 3: Responsibility to the

Profession

C-4-2 Demonstrate knowledge and ability to apply the Code of Ethics Principles to guide nursing practice and individual behaviour:

professional standards

competencies

employer policies

legal requirements

C-4-3 Demonstrate knowledge and ability to apply ethical principles to decision making:

person-centered care

cultural diversity

• fitness to practice

honesty and integrity

inter-professional collaboration

moral distress (self and others)

personal beliefs and bias

- privacy and confidentiality
- professional boundaries
- professionalism and accountability
- social determinants of health
- therapeutic relationship
- use of technology and social media

C-4-4 Demonstrate knowledge and ability to assess and manage ethical dilemmas and seek assistance when necessary.

#### Major Competency

#### C: Professionalism and Leadership

#### Competency

#### C-5: Accountability and Responsibility

Competency Statement - A Licensed Practical Nurse will:

#### C-5-1 Demonstrate knowledge and understanding of self-regulation and the accountabilities of the Licensed Practical Nurse to:

- Public
- Profession
- Employers

- Colleagues
- Self
- CLPNA

#### C-5-2 Demonstrate knowledge of individual legal accountabilities as a Licensed Practical Nurse:

- duty of care provide safe, competent, ethical, and compassionate care
- duty to report as required by applicable legislation
- maintain fitness to practice

- work within scope of practice, nursing role, policies, and procedures
- maintain standards of practice, code of ethics, registration, conduct, and continuing competence requirements.

### C-5-3 Demonstrate knowledge and ability to identify when assignment of care exceeds individual competence or scope of practice:

- research evidence-informed practices
- consult inter-professional team
- collaborate as necessary
- maintain or transfer care as necessary

#### C-5-4 Demonstrate knowledge and ability to apply concepts of professional autonomy throughout practice:

- accountable for individual actions and behaviors
- best practices and research
- collaborate as required

- moral and ethical decision making
- self-managed competence development
- implications of individual decisions

#### C-5-5 Demonstrate knowledge and ability to maintain confidentiality:

- adhere to legislation and regulation, professional standards, and employer policies
- identify risks and report breach of confidentiality
- manage patient information appropriately

#### Competency

#### **C-6: Professional Boundaries**

- C-6-1 Demonstrate knowledge and ability to effectively recognize, establish, and manage professional boundaries:
  - caring for own family and friends
  - friendships, romantic relationships
  - intimidation, favoritism
  - conflict of interest
  - giving and receiving gifts

- inappropriate physical and sexual interactions
- excessive self-disclosure
- psychological safety
- social media presence
- C-6-2 Demonstrate knowledge of risks associated with inappropriate use of social media:
  - privacy and confidentiality breach
  - public safety and trust

- nursing career impact
- use during work hours
- C-6-3 Demonstrate knowledge and ability to recognize, intervene, and report boundary violations of self or others.

### Competency

### C-7: Fitness to Practice

Competency Statement - A Licensed Practical Nurse will:

## C-7-1 Demonstrate knowledge and ability to maintain physical, mental, and emotional health to ensure safe, competent, and ethical practice.

### C-7-2 Demonstrate knowledge of components affecting fitness to practice:

- substance use and addiction
- coping mechanisms and stress management
- family and environmental issues
- physical ability
- psychological wellbeing
- sensory perception

### C-7-3 Demonstrate knowledge and ability to take responsibility and self-manage fitness to practice:

- maintain personal wellness
- manage work-life balance
- seek assistance and support
- self-report and withdraw from practice as appropriate

## Competency C-8: Professional Development

- C-8-1 Demonstrate commitment to lifelong learning through personal and professional development:
  - adopt self-reflective practice
  - identify career pathways
  - attend professional development activities
- track learning and maintain records
- participate in College of Licensed Practical Nurses of Alberta Continuing Competence Program
- C-8-2 Demonstrate knowledge and ability to participate in continuous quality improvement and evidence informed nursing practice.
- C-8-3 Demonstrate a commitment to participate in professional development activities at a local, provincial, or national level to support safety of the public and quality care.

## Competency C-9: Informal Leadership

Competency Statement - A Licensed Practical Nurse will:

- C-9-1 Demonstrate knowledge and ability to apply leadership competence throughout nursing practice.
- C-9-2 Demonstrate characteristics and attributes of an effective leader:
  - values

morals and ethics
 honesty and integrity

o authenticity o cultural diversity and inclusion

emotional intelligence

compassionempathycompetenceconfidence

professionalism

o professional conduct and o collaboration

accountability o effective communication

o systems thinker o evidence based decision making

visionarylifelong learnerself-reflective practicecoach and mentor

- C-9-3 Demonstrate knowledge and ability to recognize individual strengths and capacity to develop self as a leader.
- C-9-4 Demonstrate knowledge and ability to assign, educate, and supervise regulated and unregulated healthcare providers:
  - implement Standards of Practice (CCPNR, 2020) and Decision-Making Standards for Nurses in the Supervision of HealthCare Aides (2010) as appropriate.
  - provide guidance, coaching, and mentorship
  - evaluate needs and reassign as necessary
- C-9-5 Demonstrate knowledge and ability to assess, influence, and effectively manage difficult situations and change.
- C-9-6 Demonstrate knowledge and ability to elicit support and commitment from others to achieve a common goal.
- C-9-7 Demonstrate knowledge and ability to follow appropriate channels of communication and reporting according to employer requirements.

## Competency C-10: Formal Leadership

- C-10-1 Demonstrate knowledge and ability to apply legislation, regulation, and abide by employer requirements.
- C-10-2 Demonstrate knowledge and ability to supervise a team and assign patient care based on:
  - patient care needs
  - healthcare provider competence
  - available environmental supports
- C-10-3 Demonstrate knowledge and ability to establish and revise goals, priorities, and nursing interventions.
- C-10-4 Demonstrate knowledge and ability to model exemplary leadership practices:
  - change management
  - person-centered care
  - collaborative practice
  - effective communication
  - conflict management

- emergency preparedness
- resource utilization
- strategic planning
- support and mentor staff
- systems thinking
- C-10-5 Demonstrate knowledge and ability to organize and facilitate case conferences, reporting, and meetings.
- C-10-6 Demonstrate knowledge and commitment to organizational planning through committee involvement.

### Competency

### **C-11: Case Management**

Competency Statement - A Licensed Practical Nurse will:

### C-11-1 Demonstrate knowledge and ability to apply case management principles and processes.

### C-11-2 Demonstrate knowledge and ability to perform advanced responsibilities of case management:

- assess patient data to determine service needs
- complete patient care profile
- negotiate patient placement
- communicate with patient, family, placement site
- perform regular and ongoing reviews and assessments
- address unmet patient needs
- liaise with acute care if patient transferred due to episodic illness or injury

- complete admission assessment and documentation:
  - Resident Assessment Instrument (Inter RAI) and other assessments
  - o personal directives and Goals of Care
  - power of attorney and guardianship and trusteeship
  - o medication reconciliation
- collaboratively develop and plan care goals
- facilitate ongoing communication and support

### C-11-3 Demonstrate accountability in the case management role:

- manage multiple priorities and issues
- care management and patient advocacy
- health teaching and coaching
- maintain accuracy of patient health record
- open and timely communication
- organize and lead case conferences
- mediate and manage complex situations
- identify barriers in continuum of care
- manage resources effectively

### Competency

### C-12: Manager or Administrator

Competency Statement - A Licensed Practical Nurse will:

### C-12-1 Demonstrate knowledge and ability to lead and guide an organization or nursing business:

- identify and model vision, mission, and values
- lead and guide strategic planning
- support quality improvement and trends analysis
- support and encourage innovation
- build partnerships and networks to achieve results
- contribute to a healthy workplace culture
- foster the development of others
- engage in collaborative decision making
- assign duties and responsibilities appropriately

### C-12-2 Demonstrate knowledge and ability to identify and manage risks within an organization:

- differentiate level of risk (legal, ethical, safety)
- intervene effectively
- identify and address policy needs
- implement education and support
- communicate effectively
- involve external supports as necessary

## C-12-3 Demonstrate knowledge and ability to apply critical thinking and evidence-informed inquiry in human resource management:

- interpreting legislation and regulation
- recruitment and retention
- job descriptions, policies, procedures
- collective agreement, wages, and benefits
- performance management
- career development
- wellness and disability management
- maintaining confidentiality

## C-12-4 Demonstrate knowledge and ability to implement prudent fiscal management as manager or administrator within an organization:

- align fiscal strategy with vision, mission, values, and goals
- assess develop and manage budget
- collect, analyze, and report financial data
- ensure a system of internal controls to safeguard resources

### Competency

### **C-13: Adult Learning Principles**

Competency Statement - A Licensed Practical Nurse will:

C-13-1 Demonstrate understanding of adult education principles, teaching and learning strategies, instructional design, and program evaluation.

## C-13-2 Demonstrate knowledge and ability to apply adult learning principles in classroom, online, or through blended education delivery:

- learner independence
- prior experience
- learner readiness

- format delivery orientation
- learner motivation and expectation

## C-13-3 Demonstrate knowledge and ability to apply effective interpersonal communication in the delivery of adult education:

- adapt communication to individual learner style
- manage conflict and challenging conversations
- practice active listening
- program management and evaluation
- seek and accept feedback from learners, faculty, and others
- student management and evaluation
- utilize collaboration tools to link learning and social development

## Competency C-14: Education Design and Delivery

Competency Statement - A Licensed Practical Nurse will:

### C-14-1 Demonstrate knowledge of a systems approach to guide development of effective adult education:

- analysis
- design
- development

- implementation
- evaluation

### C-14-2 Demonstrate knowledge and ability to complete an analysis of instructional needs:

- feasibility of education
- learner characteristics (current subject knowledge, self-directed, demographics)
- learning environment (classroom, online, blended)
- course description (scope, context, expected outcomes)
- timeline for development

## C-14-3 Demonstrate knowledge and ability to apply evidence informed practice in curriculum design and development:

- develop measurable program and learning objectives and outcomes
- assess criteria
- identify learning concepts and context
- identify learner's goal and outcome
- identify level of learner support
- create and assemble course content
- review and revise course content as necessary

## C-14-4 Demonstrate knowledge and ability to implement adult learning principles in delivery of adult education:

- theories and philosophies
- learner needs, goals, and learning style
- learning and program objectives
- self-paced learning approach
- effective learning environment
- delivery methods and technologies
- pedagogy and andragogy
- communication and interpersonal skills
- teaching and learning strategies and facilitation

### C-14-5 Demonstrate knowledge and ability to evaluate teaching and learning outcomes:

- construct assessment procedures (formative, summative)
- maintain confidential, accurate, and objective learner records
- provide individual support and assistance as required
- participate in ongoing assessment and revision of curriculum to improve education design and delivery

### **D: Communication & Technology**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

### **D: Communication & Technology**

### Competency

### **D-1: Communication and Collaborative Practice**

- D-1-1 Demonstrate knowledge and ability to apply verbal and non-verbal communication techniques to support effective communication and create therapeutic relationships:
  - respectful tone and manner
  - active and attentive listening
  - paraphrase and reflect
  - seek clarification

- timeliness
- adjust style as necessary
- clear, concise, and accurate
- acceptance without judgment
- D-1-2 Demonstrate knowledge and ability to adapt communication techniques to address barriers:
  - cognitive
  - cultural
  - developmental
  - emotional
  - functional

- mental
- social
- spiritual
- language
- technological
- D-1-3 Demonstrate knowledge and ability to engage patient, family, and others as partners in patient centered care.
- D-1-4 Demonstrate knowledge and understanding of team dynamics and group processes to create a positive workplace culture.
- D-1-5 Demonstrate knowledge and ability to utilize standardized communication tools and technology to enhance effective communication processes.
- D-1-6 Demonstrate knowledge and ability to address and effectively manage interpersonal conflict to foster collaboration and trust.

### **D: Communication & Technology**

### Competency

### **D-2: Therapeutic Nurse-Patient Relationship**

Competency Statement - A Licensed Practical Nurse will:

## D-2-1 Demonstrate knowledge and ability to use appropriate communication techniques to build, maintain, and close the therapeutic nurse-patient relationship:

- advocacy
- cultural competence
- empathy and empowerment
- diversity and inclusion

- health teaching and coaching
- supportive measures and intent
- trust and respect
- appropriate documentation

### D-2-2 Demonstrate knowledge and ability to define and maintain professional and personal boundaries:

- protection of patients
- giving and receiving gifts
- caring for family and friends
- conflict of interest

- limited self-disclosure
- understanding interpersonal relationships
- social media presence
- D-2-3 Demonstrate knowledge and ability to recognize and address barriers to an effective therapeutic nurse-patient relationship:
  - breach of confidentiality
  - personal behavior

- personal bias
- power imbalance

### D: Communication & Technology

### Competency

### D-3: Legal Protocols, Documenting, and Reporting

Competency Statement - A Licensed Practical Nurse will:

- D-3-1 Demonstrate professional accountability and responsibility to adhere to legislation, legal protocols, documenting, and reporting guidelines applicable across the continuum of care.
- D-3-2 Demonstrate knowledge and ability to ensure timely, accurate, objective, concise, and complete documentation.
- D-3-3 Demonstrate knowledge and ability to document and report according to practice setting and employer requirements.
- D-3-4 Demonstrate knowledge and ability to obtain informed consent throughout care delivery as appropriate and according to employer requirements.
- D-3-5 Demonstrate knowledge and ability to manage, report, and document refusal of treatment or self-discharge.
- D-3-6 Demonstrate knowledge and ability to appropriately report and collaborate within inter-professional team.
- D-3-7 Demonstrate knowledge and ability to accept, transcribe, and initiate orders from authorized health professional(s) according to employer requirements:
  - electronic

verbal

phone

- written
- D-3-8 Demonstrate knowledge and ability to contact authorized health professional(s) to clarify an unclear or incomplete order:
  - confirm accuracy and completeness
  - discuss potential actions and/or interactions
  - share concerns related to patient's changing needs

### **D: Communication & Technology**

### Competency

### **D-4: Conflict Management**

- D-4-1 Demonstrate knowledge and ability to recognize common sources of interpersonal conflict:
  - beliefs, values, and biases

- individual experiences
- expectations and perceptions
- ineffective communication
- D-4-2 Demonstrate knowledge and ability to respond to urgent situations involving conflict to support safety of patient(s), self, and others.
- D-4-3 Demonstrate knowledge and ability to manage conflict effectively by identifying:
  - concern or issue

- mutual options and possible resolutions
- subjective interest or investment
- objective criteria
- D-4-4 Demonstrate knowledge and ability to consult with appropriate professional(s) as required in situations of conflict to work toward resolution.

### **E: Nursing Practice**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

Major Competency
E: Nursing Practice

Competency E-1: Activities of Daily Living

Competency Statement - A Licensed Practical Nurse will:

## E-1-1 Demonstrate knowledge and ability to assess patient functional status to independently perform self-

- personal hygiene, dressing, oral care, and grooming
- range of motion, lift and transfer
- nutrition and hydration
- continence care

- communication and technology
- community mobility
- health and medical interventions
- household management
- E-1-2 Demonstrate knowledge and ability to assess and document patient inability to achieve independent self-care and refer for further assessment and support as required:
  - physical and cognitive impairments
  - gaps in support system

- socioeconomic and sociocultural issues
- assistive mobility devices
- E-1-3 Demonstrate knowledge and ability to provide patient teaching to support independent use of mobilization devices:
  - crutches, cane, walker
  - wheelchair, lift and transfer device
  - motorized scooter or wheelchair

## Major Competency E: Nursing Practice

### Competency

### E-2: Nutrition and Hydration

Competency Statement - A Licensed Practical Nurse will:

- E-2-1 Demonstrate knowledge and ability to assess and provide nutrition and hydration by multiple routes:
  - enteral
  - gastrostomy
  - hypodermoclysis
  - intravenous
  - jejunostomy

- nasogastric
- nasojejunal
- oral
- orogastric
- intraosseous
- E-2-2 Demonstrate knowledge and ability to insert, manage, and remove a nasogastric tube with a stylet.
- E-2-3 Demonstrate knowledge and ability to reinsert established gastrostomy tube.
- E-2-4 Demonstrate knowledge and ability to perform nutrition and hydration assessment and manage patient care needs:
  - appetite
  - basic chewing and swallowing assessments
- dietary and fluid restrictions
- referral as required
- E-2-5 Demonstrate knowledge of parenteral nutrition composition and indications for use.
- E-2-6 Demonstrate knowledge and ability to prepare and administer parenteral nutrition. (See Standards of Practice #18, section Z of this document).
- E-2-7 Demonstrate knowledge and ability identify and manage side effects and complications of parenteral nutrition:
  - changes in skin condition, color, or temperature
  - bloating, nausea, back or flank pain
  - fainting, convulsion, or seizure
  - changes in vision
  - nutritional imbalance

- fluid retention
- change in cardiovascular status
- hepatic dysfunction (fatty liver disease, jaundice, hepatomegaly, cholelithiasis)
- metabolic imbalance (hyper or hypo: glycemia, kalemia, calcemia)

### LPN Profession Regulation:

section 16 (1) A regulated member who has completed advanced training approved by the Registrar and has been specially authorized to do so by the Registrar on the basis of that training may, in the practice of licensed practical nursing, perform the following restricted activities in accordance with the standards of practice:

(c) administering parenteral nutrition.

## Major Competency E: Nursing Practice

## Competency E-3: Elimination

Competency Statement - A Licensed Practical Nurse will:

### E-3-1 Demonstrate knowledge and ability to manage elimination needs:

- urinary
  - o bladder capacity assessment
  - o catheter flush
  - o continuous bladder irrigation
  - distension
  - o double J stent
  - o incontinence
  - urethral and coude catheter (insert & remove)
  - nephrostomy

- reinserting established suprapubic catheter
- residual urine
- retraining
- urethrostomy
- vaginal pessary (insert and remove)
- o appropriate management of prolapse
- bladder scan (see Standards of Practice #9, section Z of this
  - document).

- bowel
  - o digital stimulation
  - o enema and suppositories
  - o fecal disimpaction

- o ostomy care and irrigation
- rectal tubes
- o appropriate management of prolapse

### E-3-2 Demonstrate knowledge and ability to utilize devices and equipment related to elimination needs.

Note: Licensed Practical Nurses are not authorized to insert urological elimination devices using a guidewire or stylet.

Major Competency
E: Nursing Practice

Competency E-4: Wound Care

Competency Statement - A Licensed Practical Nurse will:

## E-4-1 Demonstrate knowledge and ability to identify patient risk for recurrence or exacerbation of skin breakdown.

## E-4-2 Demonstrate knowledge and comprehension of pathophysiology and etiology related to principles of wound assessment, healing, and management:

- biochemical process related to wound healing
  - hemostasis
  - inflammation

- proliferation and granulation
- o remodeling and maturation

- factors which impede healing
  - vascular compromise
  - immunodeficiency
  - o metabolic disease
  - o connective tissue disorders
  - malignancy

- hygiene practices
- psychosocial disorders
- o infection, burns, trauma
- nutritional deficiencies
- o effects of medication
- factors related to optimal healing environment
- utilize wound classification and staging tools
- differentiate between acute, chronic, and malignant wounds

### E-4-3 Demonstrate knowledge and ability to perform wound care assessment and treatments:

- acute wounds
- malignant wounds
- skin ulceration wounds
- surgical wounds
- traumatic wounds
- occlusive dressings
- wounds with packing

- pressure dressings
- wound compresses
- wound irrigation
- wounds with drains
- specialized wound equipment (negative pressure therapy)

### E-4-4 Demonstrate knowledge of the purpose of wound debridement.

# E-4-5 Demonstrate knowledge and ability to assess psychosocial and quality of life concerns of patient and others related to wound care management:

- alterations of body image and lifestyle impact
- attitudes, feelings, beliefs, and values
- communication and information needs
- patient and family involvement in care planning and decision making
- pain management strategies
- person-centered holistic care

Major Competency E: Nursing Practice

Competency

E-4: Wound Care

Competency Statement - A Licensed Practical Nurse will:

## E-4-6 Demonstrate knowledge and ability to apply the nursing process in assessment and management of complex, acute, chronic, and malignant wounds related to:

- arterial disease
  - o acute thrombosis
  - chronic atherosclerosis
- venous disease
  - acute deep vein thrombosis
  - chronic venous insufficiency
  - varicose veins
- co-morbidities
- chronic edema

- allergies and sensitivities
- complicated post-surgical
- diabetes
- exudate management and malodorous secretions
- functional limitations
- lymphatic sufficiency
- neuropathic and neurogenic pain
- necrosis and fungation
- vascular sufficiency

## E-4-7 Demonstrate knowledge and ability to perform clinical and technical vascular assessment of lower limbs considering medical and physical history:

- skin integrity
- hair and nail condition and growth
- mobility and range of motion
- structural deformities and varicosities
- ankle brachial pressure indices
- photoplethsmography (pulse oximeter)
- presence or absence of pulses
- neuropathy monofilament testing
- doppler application and interpretation (see Standards of Practice #9, section Z of this document).
- compression therapy
- co-morbidities
- pain (type, location, duration)
- current medications
- family history

## E-4-8 Demonstrate knowledge and ability to perform advanced wound care treatment and wound dressing to promote healing based on:

- classification and characteristics
- phase of healing
- patient need and risk factors
- protection against secondary injury
- insulating and moistening wound
- providing effective barrier to microorganisms
- preventing maceration and irritation of surrounding tissues
- free from particulate and toxins

## E-4-9 Demonstrate knowledge and ability to provide or assist with adjunct therapies often associated with care of advanced wounds:

- electrical stimulation
- negative pressure therapy
- hyperbaric oxygen therapy

Major Competency
E: Nursing Practice

Competency E-4: Wound Care

- E-4-10 Demonstrate knowledge and ability to perform wound debridement for the removal of loose avascular tissue above the dermis.
- E-4-11 Demonstrate knowledge and ability to identify patient risk for recurrence or exacerbation of skin breakdown and develop appropriate prevention strategies.
- E-4-12 Demonstrate knowledge and ability to assess psychosocial and quality of life concerns of patient and others related to advanced wound care management:
  - patient-centered holistic care
  - alterations of body image and lifestyle
  - attitudes, feelings, beliefs, and values
  - cosmetic effect of dressings
  - communication and information needs
  - coping strategies and support services
  - sociocultural issues (marginalization or social isolation)
- impact on interpersonal relationships and functional ability
- pain management strategies
- socioeconomic issues (financial, relational, emotional, spiritual)
- expectations, short- and long-term goals
- involve patient and family in care planning decision making
- E-4-13 Demonstrate knowledge and ability to provide health teaching and coaching to patient, family, and others related to advanced wound care management and the healing process.
- E-4-14 Demonstrate knowledge and ability to communicate, consult, and collaborate with inter-professional team.

Major Competency	
E: Nursing Practice	

Competency
E-5: Basic Foot Care

Competency Statement - A Licensed Practical Nurse will:

- E-5-1 Demonstrate knowledge and ability to provide basic foot care including trimming and filing nails.
- E-5-2 Demonstrate knowledge of common micro-organisms of the feet:
  - bacteria

fungi

viruses

- yeast
- E-5-3 Demonstrate knowledge of infection prevention and control standards associated with foot care.
- E-5-4 Demonstrate knowledge and ability to assess compromised circulation and its effects on lower extremities.
- E-5-5 Demonstrate knowledge and ability to provide basic foot care for a patient with compromised circulation.
- E-5-6 Demonstrate knowledge and ability to teach appropriate foot care to patient, family, and others.
- E-5-7 Demonstrate knowledge and ability to determine when patient foot care needs extend beyond basic foot care and require referral to an advanced foot care professional.

Major Competency E: Nursing Practice

Competency

#### **E-6: Advanced Practice Foot Care**

Competency Statement - A Licensed Practical Nurse will:

Note: Licensed Practical Nurses in Alberta must successfully complete Council approved education and have advanced authorization by the CLPNA Registrar to practice in the area of Advanced Practice Foot Care. (See Standards of Practice #20, section Z of this document).

E-6-1 Demonstrate knowledge and understanding of the foot care restricted activity in the Health Professions Act's Licensed Practical Nurses (LPN) Profession Regulation.

### **LPN Profession Regulation:**

section 16(2) A regulated member who has completed advanced training approved by the Council and has been specifically authorized to do so by the Registrar on the basis of that training may, in the practice of licensed practical nursing and in accordance with the standards of practice, perform the restricted activity of cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis for the purposes of performing the following activities:

- (a) removing a corn or callus as part of the provision of foot care;
- E-6-2 Demonstrate knowledge and ability to adhere to CLPNA self-employed practice guidelines when establishing an advanced practice foot care business.
- E-6-3 Demonstrate knowledge and ability to manage information according to the following principles:
  - accurate record of services provided
  - confidentiality of patient information
  - documentation of patient consent and/or signed business contract
- expected and actual outcomes of nursing services
- secure storage, retention, and authorized release of patient information
- policies and procedures of self-employed practice as necessary
- E-6-4 Demonstrate knowledge of anatomy, physiology, pathophysiology, and biomechanics of lower limbs and feet.
- E-6-5 Demonstrate knowledge and ability to provide invasive and non-invasive foot care:
  - gait assessment
  - principles and application of padding and strapping techniques
  - contraindications of padding
- removal of tissue, corns, and callus
- operation of manual and electronic tools and devices
- E-6-6 Demonstrate knowledge and ability to recognize, monitor, and manage common disorders of the lower limb and foot:
  - abnormal nails (clubbing, spooning, involuted and ingrown)
  - athlete's foot, warts, and fungus
- bunions
- hammer, claw, and mallet toes

# Major Competency E: Nursing Practice

## Competency E-6: Advanced Practice Foot Care

- E-6-7 Demonstrate knowledge and ability to monitor and manage pain associated with advanced practice foot care.
- E-6-8 Demonstrate knowledge and ability to implement principles of wound management in advanced practice foot care.
- E-6-8 Demonstrate knowledge and ability to initiate referrals as necessary.
- E-6-9 Demonstrate knowledge and ability to apply infection prevention and control standards in providing advanced practice foot care:
  - cleaning, disinfecting, and sterilization of multi-use equipment
  - single-use equipment

- hand hygiene
- personal protective equipment
- workplace hazardous materials information system
- E-6-10 Demonstrate knowledge and ability to adhere to the highest quality of nursing care and professional behaviour in self-employed practice as required by legislation, regulation, and guidelines when establishing an advanced practice foot care business.

Major Competency	
E: Nursing Practice	

Competency E-7: Phlebotomy

- E-7-1 Demonstrate knowledge of anatomy and physiology related to phlebotomy.
- E-7-2 Demonstrate knowledge and ability to perform phlebotomy and manage blood samples according to employer requirements.
- E-7-3 Demonstrate knowledge and ability to communicate and collaborate with inter-professional team.
- E-7-4 Demonstrate knowledge and ability to perform therapeutic phlebotomy for conditions such as:
  - hemochromatosis
  - sickle-cell disease
  - polycythemia

Major Con	npetency
E: Nursing	<b>Practice</b>

### Competency

### E-8: Complementary and Alternative Therapies

- E-8-1 Demonstrate knowledge of differences between conventional medicine and complementary and alternative therapies.
- E-8-2 Demonstrate knowledge of common complementary and alternative therapies:
  - bio-field energy (Reiki, electromagnetic, therapeutic touch)
  - biologically based (dietary supplements, herbal products, vitamins, aromatherapy)
- manipulative physical based (massage, chiropractic, reflexology)
- mind-body (hypnosis, visual imagery, meditation)
- whole medical (homeopathy, naturopathy, traditional medicine)
- E-8-3 Demonstrate knowledge and ability to assess and consider impact of complementary and alternative therapies on nursing interventions and plan of care, respecting patient's goals of care.
- E-8-4 Demonstrate knowledge and ability to assess and manage risk factors associated with complementary and alternative therapies:
  - patient perspective on efficacy
  - delayed treatment
  - contraindications with conventional medicine
- cost and financial impact
- understanding of health risks and interactions
- potential atypical symptoms or response
- E-8-5 Demonstrate knowledge and ability to respect and support patient's decision to supplement or replace conventional care with complementary or alternative therapy.

Major Competency
E: Nursing Practice

Competency E-9: Ear Syringing

Competency Statement - A Licensed Practical Nurse will:

- E-9-1 Demonstrate knowledge of the anatomy of the ear.
- E-9-2 Demonstrate knowledge of the purpose of ear syringing.
- E-9-3 Demonstrate knowledge and ability to perform ear syringing for the purpose of removing cerumen (see Standard of Practice #12, section Z of this document).

**LPN Profession Regulation:** 

section 14 A regulated member may in the practice of licensed practical nursing, perform the following restricted activities in accordance with the standards of practice:

- (a) if an authorized practitioner is on site and available to provide assistance
  - (i) where it is specifically authorized by an authorized by an authorized practitioner, inserting liquid, under pressure, into the ear canal, for the purpose of removing wax from ears.

## Major Competency E: Nursing Practice

## Competency E-10: Rehabilitation and Restorative Care

- E-10-1 Demonstrate knowledge of the concepts of rehabilitative and restorative care focused on maximizing optimal level of function:
  - physiological
  - psychological
  - psychosocial
- E-10-2 Demonstrate knowledge and ability to facilitate a positive rehabilitative environment and support addressing barriers to recovery:
  - alignment of treatment modalities
  - identify coping mechanisms
  - managing care goals and recovery outcomes
  - activities of daily living
  - adaptive and environmental aids
- change in abilities
- communication techniques
- functional independence
- nutritional needs
- cultural and spiritual influences
- self confidence
- E-10-3 Demonstrate knowledge and ability to support patient's self-management of episodic and chronic pain.

Major Competency	
E: Nursing Practice	

Competency E-11: Post-Mortem Care

- E-11-1 Demonstrate knowledge and ability to pronounce (expected) death, and provide post-mortem care:
  - assess cessation of vital signs
  - record and report time of death
  - notify next of kin or designate
  - notify inter-professional team
- provide supportive environment for family
- provide care of body respecting patient, family, and cultural wishes
- E-11-2 Demonstrate knowledge and ability to care for the body adhering to employer requirements in relation to expected and unexpected death.
- E-11-3 Demonstrate knowledge and ability to manage the deceased person's valuables appropriately.
- E-11-4 Demonstrate knowledge and ability to notify funeral home, prepare documents, and arrange transfer of body.
- E-11-5 Demonstrate knowledge and ability to assist in post-mortem examination and sample procurement.

### F: Safety

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

# Major Competency F: Safety

### Competency

### F-1: Urgent and Emergent Situations

- F-1-1 Demonstrate knowledge and ability to recognize and manage an urgent or emergent CODE situation according to employer requirements:
  - bomb threat or suspicious package
  - cardiac arrest or medical emergency
  - chemical spill or hazardous material
  - evacuation
  - fire

- hostage
- mass casualty incident
- missing person
- shelter in place or air exclusion
- aggression or violence
- F-1-2 Demonstrate knowledge and ability to differentiate and determine priority needs in an urgent or emergent situation.
- F-1-3 Demonstrate knowledge and ability to evaluate individual response following urgent or emergent situations.
- F-1-4 Demonstrate knowledge and ability to participate in or manage debriefing following urgent or emergent situations.
- F-1-5 Demonstrate knowledge and ability to report and document during urgent or emergent situations according to employer requirements.

Major Competency
F: Safetv

### Competency

### F-2: Infection Prevention and Control

- F-2-1 Demonstrate knowledge and ability to apply principles of infection prevention and control to reduce transmission of pathogenic micro-organisms.
- F-2-2 Demonstrate knowledge and ability to apply principles of aseptic or sterile technique appropriate to environment and care provided.
- F-2-3 Demonstrate knowledge and ability to apply principles of routine standard precautions:
  - bio-medical waste and sharps handling
  - environmental cleaning
  - hand hygiene
  - handling patient specific items and equipment
  - point of care risk assessment

- personal protective equipment
  - gloves
  - o gowns
  - masks and eye protection
- respiratory hygiene
- visitor management
- F-2-4 Demonstrate knowledge and ability to apply exposure precautions according to employer requirements:
  - airborne
  - contact
  - droplet
- F-2-5 Demonstrate knowledge and ability to immediately manage and report incidents of exposure:
  - body fluid exposure
  - equipment failure
  - needle stick injuries
- F-2-6 Demonstrate knowledge and ability to apply best practices for management of single use, patient owned and multi-use medical devices according to Reusable and Single-Use Medical Devices Standards from Alberta Health.
- F-2-7 Demonstrate knowledge and ability to prepare multi-use medical devices for specialized cleaning, disinfection, and sterilization according to employer requirements.

Major Competency	
F: Safety	

Competency F-3: Patient Safety

Competency Statement - A Licensed Practical Nurse will:

- F-3-1 Demonstrate knowledge and ability to maintain safety principles that applies to patient, self, interprofessional team, and others.
- F-3-2 Demonstrate knowledge and ability to promote and implement a culture of safety through shared:
  - attitudes

practices

goals

- values
- F-3-3 Demonstrate knowledge and ability to assess, plan, and manage patient safety throughout care delivery:
  - adverse reactions

- error prevention
- chemical, physical, and environmental restraints
- managed risk agreement
- F-3-4 Demonstrate knowledge and ability to accurately report and document patient safety according to employer requirements and applicable legislation.

Major Competency
F: Safety

Competency F-4: Workplace Safety

- F-4-1 Demonstrate knowledge and understanding of the Occupational Health and Safety Act, Regulation, and Code (OH&S).
- F-4-2 Demonstrate understanding and responsibility to comply with employer policies and OH&S Act, Regulation and Code to achieve workplace safety.
- F-4-3 Demonstrate accountability to safety of patient, self, and others by effectively contributing and adhering to a culture of safety:
  - attend OH&S orientation and training programs
  - recognize workplace hazards and controls
- report unsafe conditions as per employer requirements
- report workplace injuries as per Workers' Compensation Act
- F-4-4 Demonstrate knowledge and ability to utilize controls to identify and reduce risk of physical injury of patient's self and others:
  - hazard and exposure assessment (chemical, biological)
  - handling and disposal of known hazardous medications
- safe handling and use of tools and equipment
- safe lifting and transferring (patient, equipment)
- properly don, doff, and dispose of personal protective equipment
- F-4-5 Demonstrate knowledge and ability to promote a psychologically safe workplace for patients, self, and others:
  - identify and reduce risk of psychological injury
  - promote diversity and inclusion
  - non-violent crisis intervention, conflict management
  - employer requirements for reporting and documenting
- rights and responsibilities under legislation
- safe and appropriate responses to incidents or potential incidents
- support services available
- workplace violence and harassment risk factors

### **G**: Respiratory

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

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## Major Competency **G: Respiratory**

Competency

### **G-1: Respiratory Nursing and Interventions**

- G-1-1 Demonstrate knowledge and ability to provide respiratory interventions.
- G-1-2 Demonstrate knowledge and ability to recognize indications and contraindications for performing chest physiotherapy:
  - assisted coughing
  - deep breathing and coughing
  - incentive spirometer
  - orthopneic position

- percussion
- postural drainage
- vibration
- G-1-3 Demonstrate knowledge and ability to evaluate effects of respiratory interventions.
- G-1-4 Demonstrate knowledge and ability to manage airway issues associated with acute and chronic conditions.
- G-1-5 Demonstrate knowledge and ability to manage airway devices:
  - insert, manage, and remove oropharyngeal airway
  - insert, manage, and remove nasopharyngeal airway
  - manage endotracheal airway
  - manage laryngeal mask airway

- manage other respiratory assist devices:
  - o Ambu bag
  - o bag-valve mask
  - bilevel positive airway pressure (BiPAP)
  - o continuous positive airway pressure (CPAP)
- G-1-6 Demonstrate knowledge and ability to provide care for patient with mechanical ventilation according to employer requirements.
- G-1-7 Demonstrate knowledge and ability to provide health teaching and coaching associated with respiratory compromise:
  - activity intolerance
  - airway management
  - altered sleep pattern
  - anxiety

- ineffective airway clearance
- ineffective breathing pattern
- trauma
- disease process
- G-1-8 Demonstrate knowledge and ability to recognize indications and contraindications for oxygen administration.

## Major Competency **G: Respiratory**

### Competency

### **G-1: Respiratory Nursing and Interventions**

Competency Statement - A Licensed Practical Nurse will:

### G-1-9 Demonstrate knowledge and ability to apply and manage oxygen therapy devices:

- aerosol mask (simple face mask)
- high flow oxymizer
- nasal cannula
- nasal catheter
- non re-breathing mask
- oropharyngeal airway

- partial re-breather mask
- bi-level positive airway pressure (BiPAP) machine
- continuous positive airway pressure (CPAP) machine
- oximetry and capnography

### G-1-10 Demonstrate knowledge and ability to care for patient with oxygen therapy devices:

- monitor laryngeal mask airway
- monitor nasopharyngeal airway
- monitor ventilator

### G-1-11 Demonstrate knowledge of safety precautions when utilizing oxygen therapy.

### G-1-12 Demonstrate knowledge and ability to recognize indications and contraindications for suctioning.

## G-1-13 Demonstrate knowledge and ability to perform suctioning beyond the pharynx or endotracheal opening according to employer requirements:

- appropriate size and lumen of suction catheters
- appropriate suction pressure
- frequency of suctioning

### G-1-14 Demonstrate knowledge and ability to manage suctioning equipment.

## G-1-15 Demonstrate knowledge and ability to recognize indications and contraindications associated with tracheostomy care.

### G-1-16 Demonstrate knowledge and ability to manage tracheostomy care:

- changing tracheostomy dressing
- changing established tracheostomy
- changing tracheostomy ties
- cleaning double cannula tracheostomy tube
- deflating or inflating tracheostomy cuff
- manage humidification
- instilling solution or medication into tracheostomy
- plugging tracheostomy tube
- suctioning
- using manual resuscitation (Ambu bag)

## G-1-17 Demonstrate knowledge and ability to recognize indications and contraindications of mechanical ventilation.

## Major Competency **G: Respiratory**

#### Competency

### G-2: Chest Tubes & Drainage System

- G-2-1 Demonstrate knowledge and ability to apply critical thinking and evidence-informed inquiry throughout the nursing process in care for patient with chest drainage system.
- G-2-2 Demonstrate knowledge and understanding of the indications and contraindications for chest tube insertion:
  - hemothorax
  - spontaneous or traumatic pneumothorax
  - tension pneumothorax
  - pleural effusion

- cardiac tamponade
- diaphragmatic hernia
- hepatic hydrothorax
- refractory coagulopathy
- G-2-3 Demonstrate knowledge and ability to identify and describe purpose of pleural or mediastinal chest tubes.
- G-2-4 Demonstrate knowledge and ability to assist with insertion and removal of chest tubes.
- G-2-5 Demonstrate knowledge and ability to setup, manage, and assess a chest drainage system.
- G-2-6 Demonstrate knowledge and ability to identify potential complications for patients with chest drainage system:
  - compromise in system patency
  - disconnection or malfunction
  - incorrect placement, dislodgement, or occlusion
- hemorrhage
- pulmonary edema
- infection
- subcutaneous emphysema

### **H: Orthopedics**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

Major Competency	
H: Orthopedics	

#### Competency

### H-1: Orthopedic Nursing and Interventions

- H-1-1 Demonstrate knowledge of anatomy, physiology, and pathophysiology related to the musculoskeletal system:
  - determinants of normal structure and function
  - symptoms indicating immediate and urgent need for intervention
- infection prevention, risks, exposure, and management
- indicators of illness, impairment, or trauma
- H-1-2 Demonstrate knowledge and ability to assess and manage nursing care for conditions and injuries of the musculoskeletal system.
- H-1-3 Demonstrate knowledge and ability to apply principles of pharmacokinetics and pharmacodynamics specific to medication management of orthopedic patients.
- H-1-4 Demonstrate knowledge of orthopedic diagnostic tests and nursing implications:
  - arthrogram
  - blood tests
  - bone scan
  - computed tomography (CT scan)
  - discography

- Doppler studies
- electromyography (EMG)
- magnetic resonance imaging (MRI)
- myelogram
- radiography
- H-1-5 Demonstrate knowledge and ability to assess and manage ambulation and immobilization needs:
  - braces and splints
  - canes, crutches, walkers, wheelchairs
  - external fixators
  - mechanical lifts

- nutritional status
- pain management
- protective devises
- traction

## Major Competency H: Orthopedics

#### Competency

#### H-2: Traction and Immobilizers

- H-2-1 Demonstrate knowledge of indications and contraindications associated with use of traction and immobilizers.
- H-2-2 Demonstrate knowledge and ability to assess and manage patient with traction and immobilization devices:
  - mobilization considerations
  - complications (compartment or compression syndrome, infection, bleeding)
- neurovascular status
  - color, temperature, edema, movement, pulse, sensation (CTEMPS)
- pain assessment
- H-2-3 Demonstrate knowledge and ability to assess and manage cast care:
  - bivalving
  - trimming and removing

- windowing
- univalving
- H-2-4 Demonstrate knowledge and ability to fit and apply pre-formed removable splints and braces:
  - adjustable knee braces (Zimmer splints)
  - alama da dia
  - clam shells

- half slabs and back slabs
- soft cervical collars
- H-2-5 Demonstrate knowledge and ability to manage nursing care for patient with traction or external fixators:
  - bucks
  - halo
  - manual

- pin site
- skeletal
- skin
- H-2-6 Demonstrate knowledge of indications and contraindications associated with care of c-spine injury.
- H-2-7 Demonstrate knowledge and ability to cut, form, and apply removable resting splint or immobilizer.

## Major Competency H: Orthopedics

#### Competency

#### H-3: Advanced Practice Orthopedic Nursing

Competency Statement - A Licensed Practical Nurse will:

Note: Licensed Practical Nurses in Alberta must successfully complete Council approved education and have advanced authorization by the CLPNA Registrar to practice in the area of Advanced Practice Orthopedic Nursing. (See Standards of Practice #23, section Z of this document).

- H-3-1 Demonstrate knowledge and understanding of restricted activities related to orthopedic nursing in the Health Professions Act's Licensed Practical Nurses Profession Regulation.
- H-3-2 Demonstrate knowledge and ability to provide LPN advanced practice orthopedic nursing care in accordance with professional legislation, regulation, CLPNA standards of practice, and guidelines.

**LPN Profession Regulation:** 

section 17 A regulated member who has completed advanced training approved by the council and has been specifically authorized to do so by the Registrar on the basis of that training may, in the practice of licensed practical nursing and in accordance with the standards of practice, perform the restricted activity of setting or resetting a fracture of a bone for the purposes of inserting and removing orthopaedic devices and applying casts if:

- (a) the regulated member has direction from an authorized practitioner, and
- (b) an authorized practitioner is on site and available to provide assistance.

## Major Competency H: Orthopedics

### Competency

### H-3: Advanced Practice Orthopedic Nursing

Competency Statement - A Licensed Practical Nurse will:

# H-3-3 Demonstrate advanced knowledge of human anatomy and physiology related to pediatric and adult orthopedic care:

- associated terminology
- body systems

- body planes and directions
- range of motion and limb positioning

### H-3-4 Demonstrate knowledge of musculoskeletal conditions and treatment associated with:

- arthritis
  - o rheumatoid
  - o steo (degenerative)
  - o gout
  - o psoriatic
  - o lupus
  - o septic
  - o juvenile
- inflammation and infection
  - ankylosing spondylitis and spondylolisthesis
  - o bursitis
  - o cellulitis
  - o epicondylitis
  - o myositis (muscle)
  - osteomyelitis and osteitis
  - o synovitis
  - o tendonitis and tenosynovitis

- soft tissue injury
  - o contusion, strain or sprain, repetitive injury
    - ligamentous
    - labral
    - tendinous
    - fibrocartilaginous
- trauma
  - o fractures and bone healing
  - o dislocations
  - o growth plate injuries
  - o compartment syndrome
  - o fat or pulmonary embolism
- other
  - o amputation
  - osteoporosis
  - congenital disorders
  - o kyphosis and scoliosis
  - contractures and deformities
  - o growths and tumors
  - Gillian Barre Syndrome
  - Charcot's Foot

## H-3-5 Demonstrate knowledge and ability to perform a holistic ongoing assessment of pediatric and adult orthopedic patients.

- H-3-6 Demonstrate knowledge and ability to manage complications associated with immobility and ambulation of orthopedic patients.
- H-3-7 Demonstrate knowledge and ability to use a goniometer to assess initial and subsequent range of motion related to musculoskeletal injury and recovery process.

### **H: Orthopedics**

#### Competency

### H-3: Advanced Practice Orthopedic Nursing

Competency Statement - A Licensed Practical Nurse will:

### H-3-8 Demonstrate ability to distinguish between a variety of x-ray views:

- posterioranterial (PA)
- anterioposterial (AP)
- axillary
- lateral
- medial

- mandibular
- panoramic
- oblique
- transverse
- tunnel

### H-3-9 Demonstrate knowledge and ability to assemble, apply or assist in application and removal of orthopedic devices:

- compression wrap
  - Tensor bandage
  - Tubigrip
  - elastic support stockings
- slings and immobilizers
  - o acromioclavicular harness
  - o clavicular strap
  - o collar and cuff sling
- braces and splints
  - o cervical (soft and rigid)
  - o humeral
  - o wrist and hand
  - o knee

- o spinal
- o pelvic (Pavlik harness)
- o femoral and tibial
- o foot and ankle
- traction
  - o skin and skeletal
  - balanced suspension traction
  - Balkan frame
  - Bryant of Gallows traction
  - Bucks
  - Gardner Wells tongs
  - Kirschner wires
  - Steinmann pin

### H-3-10 Demonstrate knowledge of cast and splint construction, application, care, and removal:

- above and below joint
- weight bearing and non-weight bearing
- back slabs
- cylinder casts
- functional cast therapy
- gutter splints
- hip spica

- patella tendon bearing
- plaster and fiberglass casts
- sugar tong splint
- total contact casting
- volar slabs
- waterproof casting
- wedging

### I: Neurological

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

## Major Competency I: Neurological

#### Competency

### I-1: Neurological Nursing and Interventions

- I-1-1 Demonstrate knowledge of anatomy, physiology, and pathophysiology related to illness, disorders, and trauma of the neurological system:
  - determinants of normal function
  - impairment, shock
  - illness, trauma, and surgery:
    - brain and spinal tumors
    - carotid endarterectomy
    - Guillain-Barre syndrome
    - o Intracranial hemorrhage or pressure
    - meningitis

- seizures and epilepsy
- o brain and spinal cord injury
- cerebral vascular accident or transient ischemic attack
- I-1-2 Demonstrate knowledge and ability to evaluate and monitor neurological vital signs:
  - cranial nerve assessment
  - motor assessment

- sensory assessment
- reflex assessment
- I-1-3 Demonstrate knowledge and ability to apply principles of pharmacokinetics and pharmacodynamics specific to medication management in neurological nursing.
- I-1-4 Demonstrate knowledge and understanding of indications, contraindications, and complications associated with neurological diagnostic tests and procedures:
  - computer tomography (CT)
  - angiography
  - electroencephalography (EEG)
  - magnetic resonance angiography (MRA)
  - magnetic resonance imaging (MRI)
  - ultrasonography (carotid Doppler, trans cranial Doppler)
  - radiography

- electromyography (EMG)
- nerve conduction studies
- lumbar puncture
- myelography
- electrocardiography (ECG)
- echocardiography
- transesophageal echocardiography (TEE)
- I-1-5 Demonstrate knowledge and ability to anticipate and recognize actual or potential neurological crisis:
  - abnormal respirations
  - bradycardia and tachycardia
  - decreased level of consciousness
- hypertension and hypotension
- hyperthermia and hypothermia
- widening pulse pressure
- I-1-6 Demonstrate knowledge and ability to recognize signs and symptoms and implement interventions during a life-threatening neurological event.

# Major Competency I: Neurological

#### Competency

### I-1: Neurological Nursing and Interventions

#### A Licensed Practical Nurse will:

- I-1-7 Demonstrate knowledge and ability to care for patients requiring advanced observation and interventions according to employer requirements.
- I-1-8 Demonstrate knowledge and ability to assist or provide advanced physical assessment, monitoring, care, and interventions according to employer requirements:
  - 12 and 15 lead ECG
  - acid base balance
  - acute pain management
  - advanced swallowing assessment
  - arterial blood gas analysis
  - arterial line monitoring
  - cerebral and cognitive function testing
  - chest assessment and physiotherapy

- spinal and cranial nerve assessment
- fluid and electrolyte monitoring
- lumbar drain monitoring
- pressure monitoring
  - central venous pressure (CVP)
  - o Intra-arterial line (IA)
  - Intra-cranial pressure (ICP)

## Major Competency I: Neurological

### Competency

### I-2: C-Spine Management

- I-2-1 Demonstrate knowledge and ability to assess for spinal injury.
- I-2-2 Demonstrate knowledge of best practices in cervical spine management.
- I-2-3 Demonstrate knowledge of criteria for spinal immobilization and spinal precautions:
  - neck and back pain with or without nerve involvement
    - o degenerative bone disease
    - o head and neck trauma
    - o altered mental status or unconsciousness
- I-2-4 Demonstrate knowledge and ability to apply and maintain spinal precautions:
  - application, maintenance, and removal of cervical collars (soft, rigid)
  - assist to stabilize spine with manual or mechanical traction
- log rolling
- maintain proper spinal and body alignment
- transportation precautions
- use of spine board or slider board
- I-2-5 Demonstrate knowledge and ability to provide nursing care and interventions specific to a patient with a spinal injury:
  - neurovascular status, sensation, and strength
  - skin care and protective measures
  - wounds and drainage

- nutrition, hydration, and elimination
- casts, halo traction, immobilizers
- comfort measures and pain management

### J: Cardiovascular

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**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

### Major Competency J: Cardiovascular

#### Competency

### J-1: Cardiovascular Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

### J-1-1 Demonstrate knowledge and understanding of anatomy, physiology, and pathophysiology of the cardiovascular system and cardiovascular disease:

- cardiac cycle and conduction pathway
  - o arthrosclerosis
  - o dysrhythmias
  - valve insufficiency or stenosis
  - cardiomyopathy
  - o congenital heart disease or anomaly
  - pericarditis, myocarditis, endocarditis
- blood pressure and central venous pressure

- cardiovascular diseases and disorders
  - o heart failure or organ system failure
  - o hypercholesterolemia and dyslipidemia
  - hyper and hypotension
  - ischemic heart disease
  - o peripheral artery disease
- decompensation, shock, hypovolemic shock

### J-1-2 Demonstrate knowledge and ability to assess and monitor the cardiovascular patient:

- hemodynamics
- lab values and biochemical markers
- peripheral diagnostic interventional procedures
- renal sufficiency
- venous thromboembolism

- prepare patient for diagnostic procedures, treatments, and surgery
- sequential compression device
- vital signs
- differentiate normal rhythm and arrhythmia
- implement pre and post procedure protocols

#### J-1-3 Demonstrate knowledge and ability to utilize cardiac equipment:

- apply 3 and 5 lead electrocardiograms (ECG)
- apply telemetry equipment
  - resuscitation equipment:
    o external defibrillator
  - non-invasive and mechanical
    - ventilation

- o bag and mask
- o crash cart

### J-1-4 Demonstrate knowledge of the use of cardiac devices:

- external cardiac pacing
- echocardiography
- 24-hour Holter monitor

- pacemaker
- central venous pressure (CVP) and arterial lines

### Major Competency J: Cardiovascular

#### Competency

### J-1: Cardiovascular Nursing and Interventions

- J-1-5 Demonstrate knowledge and understanding of normal and abnormal lab values and cardiac markers.
- J-1-6 Demonstrate knowledge and ability to apply principles of pharmacokinetics and pharmacodynamics specific to medication management in cardiovascular nursing according to employer requirements.
- J-1-7 Demonstrate knowledge and understanding of indications, contraindications, and complications related to cardiovascular diagnostic tests and procedures:
  - angiogram (radial, femoral)
  - angioplasty and stents
  - coronary artery bypass grafting
  - echocardiogram (transthoracic, transesophageal)
  - cardiac stress test

- radionuclide angiography:
  - MIBI scan (Cardiolite, Perantine)
  - o multiple gated acquisition
  - o thallium scan
- right heart catheterization
- tilt test
- J-1-8 Demonstrate knowledge and ability to anticipate and recognize actual or potential life-threatening health crisis:
  - alteration in cardiac output
  - impaired tissue perfusion (compartment syndrome)
  - cardiac arrhythmias
  - cardiac tamponade

- cardiomyopathy
- congenital heart defect
- congestive heart failure
- myocardial infarction
- shock
- J-1-9 Demonstrate knowledge and ability to recognize signs and symptoms of a life-threatening cardiac event and initiate or assist with cardiopulmonary resuscitation.
- J-1-10 Demonstrate knowledge of internal and external cardiac pacing devices and indications for use:
  - telemetry equipment
  - external pacemaker and implantable cardioverter defibrillator (ICD) complications:
    - o failure to output
    - o failure to capture
    - sensing abnormalities

## Major Competency J: Cardiovascular

#### Competency

### J-1: Cardiovascular Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

### J-1-11 Demonstrate knowledge and ability to care for patient requiring advanced cardiac observation and interventions:

- mechanical ventilation
- hemodynamic monitoring
  - o central venous pressure (CVP)
  - o arterial line

### J-1-12 Demonstrate knowledge and ability to assist with or provide cardiac procedures and treatments:

- assess and monitor diagnostic and lab values
- 12 and 15 lead ECG application and interpretation
  - rhythm, rate, P-wave configuration, PR interval, QRS duration/ configuration, inversion flattening, other wave anomalies
- atrial fibrillation protocol
- monitor and manage symptoms of arrhythmias and cardiac tamponade
- monitor and remove radial bands
- monitor femoral sheaths and epicardial pacing wires

### **K: Surgical**

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## Major Competency K: Surgical

#### Competency

### K-1: Surgical Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

### K-1-1 Demonstrate knowledge of clinical pathways related to surgical procedures:

- preoperative
- intraoperative
- postoperative

- anticipated and unanticipated outcomes
- complications

### K-1-2 Demonstrate knowledge and ability to provide education to the surgical patient:

- deep breathing and coughing
- dietary needs and restrictions
- drains and tubes
- discharge planning
- incentive spirometry
- pain management

- mobility and exercise
- rehabilitation and restorative care
- referrals
- surgical site and wound management
- personal directives and Goals of Care

## K-1-3 Demonstrate knowledge and ability to perform preoperative care according to employer requirements:

- confirm oral intake
- primary contact information
- ensure informed consent

- preoperative history and assessment
- pre-surgical preparation
- transfer patient to operating room

### K-1-4 Demonstrate knowledge and ability to receive patient from recovery room and perform postoperative care:

- review and initiate postoperative orders
  - initial and ongoing postoperative assessment:
    - binders and compression devices
    - o casts, splints, orthopedic devises
    - o cognitive and neurovascular status
    - o dermatome checks

- dressings, wounds, drainage devices
- infusion therapy
- vital signs
- safety precautions, mobilization, and transfer methods
- nutrition and elimination needs
- pain assessment and management

#### K-1-5 Demonstrate knowledge and ability to assess and manage surgical incision and wound care:

- dressings
- empty, irrigate, shorten, and remove drains
- packing and removal of packing

Major Competency	
K: Surgical	

Competency K-2: Endoscopy

Competency Statement - A Licensed Practical Nurse will:

### K-2-1 Demonstrate knowledge and ability to perform pre-procedural care for endoscopy patient:

admission assessment

- pre-procedural checklist
- complete health and medication history
- medication administration

### K-2-2 Demonstrate knowledge and ability to monitor procedural sedation:

- consider risks and precautions
- continuous assessment of patient status
- infusion management

#### K-2-3 Demonstrate knowledge and ability to perform post-procedural care:

monitor vital signs

- monitor and manage complications
- pain and comfort management
- discharge teaching and referral

### K-2-4 Demonstrate knowledge and ability to administer procedural sedation according to employer requirements.

- K-2-5 Demonstrate knowledge and ability to assist with or perform endoscopy procedures according to employer requirements and physician direction with the exception of advancing or withdrawing (manipulating) the scope:
  - upper and lower gastrointestinal procedures
  - pulmonary procedures
  - stabilize scope for visualization
  - manage inflation and deflation
- sub mucosal and intramural injection and tattoo marking
- specimen procurement and clipping
- prepare cautery equipment and band devices
- prepare and deliver Hemospray
- prepare and label specimens
- K-2-6 Demonstrate knowledge and ability to perform post-procedural equipment cleaning and preparation for sterilization, according to employer requirements.

# Major Competency K: Surgical

#### Competency

#### K-3: Post Anesthetic Recovery

Competency Statement - A Licensed Practical Nurse will:

## K-3-1 Demonstrate knowledge and ability to receive and manage patient for post anesthetic recovery on a surgical unit:

- initial and continuing assessment:
  - o monitor and manage infusions
  - o level of consciousness
  - o pain and comfort management
  - output (urine, blood)
  - vital signs
  - wounds and drains
  - o emergence from anesthesia

- medication administration
- monitor for changes in patient status
- postoperative complications
- post-operative checklist and documentation

# K-3-2 Demonstrate knowledge and ability to receive and manage patient for immediate post anesthetic recovery in post anesthetic care unit (PACU):

- initial and continuing assessment:
  - monitor and manage infusions
  - o level of consciousness
  - o pain and comfort management
  - o output (urine and blood)
- obtain specimens
- administer medications
- monitor for changes in patient status
- post-operative complications

- vital signs
- o wounds and drains
- o emergence from anesthesia
- consult and collaborate with inter-professional team
- determine transfer out of post anesthetic care unit
- post-operative checklist and documentation

### Major Competency K: Surgical

#### Competency

#### K-4: Advanced Practice Perioperative Nursing

Competency Statement - A Licensed Practical Nurse will:

Note: Licensed Practical Nurses in Alberta must successfully complete Council approved education and have advanced authorization by the CLPNA Registrar to practice in the area of Advanced Practice Perioperative Nursing. (see Standards of Practice #23, section Z of this document).

- K-4-1 Demonstrate knowledge and understanding of restricted activities related to perioperative nursing in the Health Professions Act's Licensed Practical Nurses Profession Regulation.
- K-4-2 Demonstrate knowledge and ability to provide LPN advanced practice perioperative nursing care in accordance with professional legislation, regulations, CLPNA Standards of Practice, and any CLPNA guidelines.

**LPN Profession Regulation:** 

section 16(2) A regulated member who has completed advanced training approved by the Council and has been specifically authorized to do so by the Registrar on the basis of that training may, in the practice of licensed practical nursing and in accordance with the standards of practice, perform the restricted activity of cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis for the purposes of performing the following activities:

(b) performing activities under the direction of an authorized practitioner who is performing surgery.

### Major Competency K: Surgical

#### Competency

### K-4: Advanced Practice Perioperative Nursing

Competency Statement - A Licensed Practical Nurse will:

#### K-4-3 Demonstrate knowledge and ability to provide specialized perioperative nursing care:

- admission, discharge, and transfer of patient
- advocate for patient
- anesthesia methods and protocols
- asepsis and sterile techniques
- patient and team safety
- crash cart, defibrillator, and code protocol
- documentation and reporting
- infection prevention and control standards

- maintain and uphold policy and procedure
- administer pre, intra, and post-operative medication(s)
- ordering of supplies and equipment
- appropriate response to complications of anesthesia
- sterile hand scrub and gowning
- surgical procedures, protocols, and related disease processes

### K-4-4 Demonstrate knowledge and ability to perform decontamination and disinfection procedures within the surgical setting:

- surgical instruments
- electrosurgical tools
- endoscopes and instrumentation
- laser equipment

- power tools
- robotic equipment
- video equipment

### K-4-5 Demonstrate knowledge and ability to receive and monitor patient in pre-operative area:

- check patient chart for completeness
- review health history
- verify signed consent
- complete pre-operative checklist and verify surgical site
- provide emotional support and relevant information to patient and family
- provide comfort measures
- check infusion and output
- assist with pre-operative examination as required
- communicate and documents relevant findings

### K-4-6 Demonstrate knowledge and ability to assist anesthesia provider:

- check anesthetic machine and cart and restock required supplies
- initiate intravenous and prepare supplies for anesthesia provider
- assist during induction
  - intubation, fixation, and connection of endotracheal tube
  - provide cricoid pressure if required

- apply eye protection to patient as necessary
- check blood and blood products
- assist with extubation and reversal of anesthesia
- assist with transport of the intubated or extubated post-operative patient to post-anesthetic recovery room (PARR) or intensive care unit (ICU)

# Major Competency K: Surgical

### Competency

### K-4: Advanced Practice Perioperative Nursing

Competency Statement - A Licensed Practical Nurse will:

#### K-4-7 Demonstrate knowledge and ability to fulfill the responsibilities of the perioperative circulating role:

- responsiveness to surgical team throughout procedure
- prepare equipment and room supplies specific to operative procedure and surgeon preference
- notify all inter-professional personnel required for surgical case
- ensure x-rays and diagnostic tests are available if required
- confirm or complete pre-operative assessment and checklist
- transport or receive patient to the operating room and complete appropriate checks
- safely position and secure patient on operating table
- reassure patient and explain procedure
- complete safe surgery checklist
- apply required monitoring equipment
- assist anesthesia provider with intubation and induction
- reposition patient for surgical procedure as required
- insert urinary catheter as required

- prepare operative site according to specific protocols
- assist with draping
- connect suction, cautery, and equipment as required
- prepare medications and irrigations for administration
- appropriately handle and label all specimens
- inspect and open sterile supplies and pass to scrub nurse
- obtain additional instruments and supplies as required
- manage intra-operative sterilization if required
- accurately complete intra-operative case record
- document fluid output
- document unusual incidents with follow up action required
- monitor vital signs
- participate in all surgical instrument and supply counts
- assist with transfer of patient from operating table to stretcher
- assist with transport of intubated or extubated post-operative patient to post-anesthetic recovery room (PARR) or intensive care unit (ICU)

### Major Competency K: Surgical

#### Competency

### K-4: Advanced Practice Perioperative Nursing

Competency Statement - A Licensed Practical Nurse will:

### K-4-8 Demonstrate knowledge and ability to fulfill the responsibilities of the perioperative scrub role:

- check case cart and supplies
- prepare and maintain efficient sterile set-up and technique
- ensure equipment and instrumentation is available, set up, and in good repair
- perform skin prep prior to procedure
- drape patient for procedure
- complete safe surgery checklist prior to incision
- assist surgical team with sterile gowning and gloving
- organize and handle surgical instruments, equipment, and sutures
- provide instruments and supplies to surgeon and surgical team
- sponge, suction, and retract incision as directed
- observe for break in sterile technique

- assist with re-establishing sterile field if required
- accurately identify specimens and pass to circulating nurse
- anticipate unexpected or adverse events and respond appropriately
- handle and prepare medications and contrast agents
- effectively communicate with surgical team
- participate in all surgical instrument and supply counts
- assist with skin closure and apply sterile dressing
- verify accuracy of intra-operative case record
- assist with transfer of patient from operating table to stretcher
- assist with transport of intubated or extubated post-operative patient to post-anesthetic recovery room (PARR) or intensive care unit (ICU)

### L: Maternal & Newborn

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

### L: Maternal & Newborn

### Competency

### L-1: Maternal Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

#### L-1-1 Demonstrate knowledge of anatomy and physiological changes during pregnancy.

### L-1-2 Demonstrate knowledge and ability to perform holistic health assessment and history:

- signs and symptoms of pregnancy
- last menstrual cycle
- expected date of delivery (confinement)
- number of pregnancies (gravida, para)
- fundal height
- auscultation of fetal heart
- fetal heart monitoring (see Standard of Practice #11, in section Z of this document)
- routine and non-routine lab collection and results
- identify potential risk factors
- health and genetic concerns
  - o sexually transmitted infections
  - o socio-economic status
  - substance use or abuse

## L-1-3 Demonstrate knowledge to assess fetal positioning and movement and offer interventions as appropriate.

### L-1-4 Demonstrate knowledge of commonly known complications associated with pregnancy:

- abruptio placenta
- ectopic pregnancy
- effects of substance use or abuse
- fetal growth anomalies
- gestational diabetes mellitus
- hyperemesis gravidarum

- hypertensive disorder (preeclampsia)
- malposition of fetus
- placenta previa
- pre-term labor
- spontaneous or missed abortion

## L-1-5 Demonstrate knowledge and ability to provide pre-operative care to patient undergoing emergency or elective caesarean section.

#### L-1-6 Demonstrate knowledge of stages of labor and delivery:

- Stage 1 onset, effacement, and dilation of cervix
- Stage 2 full cervix dilation to delivery of baby
- Stage 3 delivery of placenta
- Stage 4 recovery following delivery

#### L: Maternal & Newborn

# Competency L-1: Maternal Nursing and Interventions

- L-1-7 Demonstrate knowledge and ability to perform health assessment and collection of admission information specific to maternal nursing:
  - last menstrual cycle
  - expected date of delivery (confinement)
  - number of pregnancies (gravida, para)
  - fundal height
  - auscultation of fetal heart
  - tests and treatments
  - lab collection and results

- awareness and respect for culturally related practices and beliefs
- prenatal records and history
- risk factors
  - health and genetic concerns
  - o sexually transmitted infection
  - o socioeconomic status
  - substance use or abuse
- L-1-8 Demonstrate knowledge and ability to assist authorized professional(s) during management of labour and delivery:
  - vaginal exams
  - artificial rupture of membranes
  - epidural anesthesia or analgesia
  - pharmacological induction

- APGAR scoring
- cord blood sample
- examination of placental tissue and cord structure
- L-1-9 Demonstrate knowledge and ability to provide ongoing assessment, monitoring, and care of laboring patient in collaboration with authorized professional(s):
  - coach patient and partner
  - infusion therapy
  - medication administration
- non-pharmacological comfort measures
- specimen collection and testing
- nitrous oxide (see Standard of Practice #14, in section Z of this document)
- L-1-10 Demonstrate knowledge and ability to provide initial assessment, care, and medications to a newborn.
- L-1-11 Demonstrate knowledge and ability to assist authorized professional(s) with managing post-delivery complications.
- L-1-12 Demonstrate knowledge and ability to provide compassionate care for patient, family, and others in the event of an unexpected still birth or death of newborn.
- L-1-13 Demonstrate knowledge and ability to collaborate with authorized professional(s) in the delivery of pre-term, non-viable fetal termination induction:
  - assist with induction medication protocol
  - assess cessation of fetal heart
  - compassion and support for patient, family, and others
- ongoing monitoring and care of laboring patient
  - o non-pharmacological comfort measures
  - medication administration

### L: Maternal & Newborn

#### Competency

#### L-1: Maternal Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

### L-1-14 Demonstrate knowledge and ability to collaborate with authorized professional(s) in the delivery of non-viable fetus:

- ongoing monitoring and care of laboring patient
- non-pharmacological comfort measures
- medication administration

- procure specimens according to employer requirements
- provide care of body respecting patient, family, cultural wishes
- provide supportive environment for family

## L-1-15 Demonstrate knowledge and ability to manage post-mortem care of non-viable fetus according to employer requirements, respecting cultural and spiritual practices.

### L-1-16 Demonstrate knowledge of the physiological process of involution of the uterus following childbirth.

### L-1-17 Demonstrate knowledge and ability to provide post-operative care to patient following caesarean section:

- bowel and bladder function
- incision care and dressing changes
- pain management

- post anesthetic and epidural protocols
- post-operative hemorrhage
- post-surgical precautions

### L-1-18 Demonstrate knowledge and ability to recognize and assess post-partum complication:

- abnormal vital signs
- boggy fundus
- deep vein thrombosis
- difficulty voiding

- edema
- hemorrhage
- clots, tissue, or infection
- seizure

### L-1-19 Demonstrate knowledge and ability to provide health teaching and coaching in post-natal and newborn care:

- changes in family dynamics
- community resources
- discharge planning
- feeding (breast or bottle)
- importance of bonding

- importance of hydration, diet, and rest
- resuming sexual activity
- signs and symptoms of post-partum depression
- skin to skin contact with newborn

### L-1-20 Demonstrate knowledge and ability to provide health teaching and coaching as a lactation consultant.

#### L: Maternal & Newborn

#### Competency

#### L-2: Newborn Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

### L-2-1 Demonstrate knowledge and ability to perform initial and ongoing assessment of newborn:

- monitoring intake/output
- latching and feeding

- specimen collection and testing
  - phenylketonuria (PKU)
  - o bilirubin
  - blood glucose

### L-2-2 Demonstrate knowledge and ability to recognize signs and symptoms of newborn distress and respond immediately.

#### L-2-3 Demonstrate knowledge and ability to manage newborn complications:

- blood glucose level
- latching and feeding
- jaundice

- physical or genetic anomalies
- substance withdrawal
- unexpected death

## L-2-4 Demonstrate knowledge and ability to assist authorized professional(s) with transferring newborn to specialized care.

### L-2-5 Demonstrate knowledge and ability to provide discharge teaching for newborn care:

- bathing of newborn
- cord care
- latching and feeding
- importance of bonding
- importance of hydration

- newborn and car seat safety
- skin to skin contact
- community health nurse visits
- pediatrician and physician follow-up
- referrals to other health professionals

### L-2-6 Demonstrate knowledge and ability to perform holistic assessment on critical care newborn:

- admission assessment
- advanced neonatal physiological systems assessment
- neonatal pain, agitation, and sedation scale (N-PASS):
  - crying and irritability
  - behavior state
  - facial expression
  - o extremities tone
  - vital signs

### L-2-7 Demonstrate knowledge of common reasons for neonatal admission to intensive care unit:

- complications following delivery
- low birth weight
- medical conditions or birth defect
- multiples (twins, triplets)
- premature birth
- substance withdrawal

### L-2-8 Demonstrate knowledge and ability to monitor clinical manifestations of critically ill or premature newborn.

### Major Competency L: Maternal & Newborn

#### Competency

### L-2: Newborn Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will

### L-2-9 Demonstrate knowledge of specialized equipment pertaining to care of critically ill or premature newborn.

### L-2-10 Demonstrate knowledge and ability to provide interventions for critically ill or premature newborn:

- APGAR scoring
- arterial line monitoring
- blood and blood product monitoring
- blood draws
- blood glucose monitoring

- gavage or tube feeding
- oxygen therapy
- phenylketonuria (PKU)
- parenteral nutrition monitoring
- temperature management

### L-2-11 Demonstrate knowledge and ability to provide fluids and medication by infusion to critically ill and premature newborn:

- peripheral central line (PICC)
- direct administration (push)
- peripheral intravenous infusion
- umbilical venous catheter (UVC)

## L-2-12 Demonstrate knowledge and ability to provide teaching and support to family of critically ill or premature newborn during care and upon discharge:

- latching and feeding
- coping skills
- infection prevention and control
- multiple infusion lines
- advanced treatments
- vaccination schedules

- special care and precautions
- referrals to other health professionals
- community health nurse visits
- pediatrician/physician follow-up
- compassionate care in the event of newborn death

### Major Competency L: Maternal & Newborn

### Competency

#### L-3: Neonatal Resuscitation

- L-3-1 Demonstrate knowledge of normal physiological changes of newborn occurring with birth.
- L-3-2 Demonstrate knowledge of pathophysiology of asphyxia and apnea in newborn.
- L-3-3 Demonstrate knowledge and ability to perform care and holistic rapid assessment of newborn in distress:
  - term gestation
  - respiratory effort (breathing or crying)
  - muscle tone
  - temperature management

- position, clear airway
- dry, stimulate, reposition
- determine need for resuscitation
- L-3-4 Demonstrate knowledge and ability to perform resuscitation of newborn:
  - provide supplemental oxygen
  - perform chest compressions
- administer medications
- monitor oxygen level
- L-3-5 Demonstrate knowledge and ability to assist authorized professional(s) with additional resuscitation interventions for newborn in persistent distress:
  - identify need for intubation
  - provide PPV or continuous positive airway pressure (CPAP)
- perform chest compressions
- administer medications as appropriate
- L-3-6 Demonstrate knowledge and ability to assess for complications and manage care of successfully resuscitated at risk newborn:
  - feeding and fluid management
  - hypo or hyperglycemia
  - hypo or hypertension
  - metabolic acidosis
  - organ system complications

- respiratory complications
- seizures
- temperature management
- lab values

### **M: Pediatrics**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

### Major Competency M: Pediatrics

#### Competency

### M-1: Pediatric Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

M-1-1 Demonstrate knowledge of stages of growth and development of pediatric patient.

- M-1-2 Demonstrate knowledge of common pediatric diseases and medical conditions:
  - asthma
  - congenital anomalies
  - congenital heart disease
  - cystic fibrosis

- Down syndrome
- muscular dystrophy
- spectrum disorders (autism, fetal alcohol)
- M-1-3 Demonstrate knowledge and ability to identify, manage, and report signs or symptoms of abuse of pediatric patient according to legislation and employer requirements.
- M-1-4 Demonstrate knowledge and ability to assess risk and implement safety measures for pediatric patient according to employer requirements.
- M-1-5 Demonstrate knowledge and ability to apply principles of pharmacokinetics and pharmacodynamics specific to pediatric patient.
- M-1-6 Demonstrate knowledge and ability to adapt care to provide optimum nutrition for pediatric patient:
  - adaptive devices
  - allergies, sensitivities, preferences
  - conducive environment
  - cultural and religious influences
- feeding techniques
- nutritional requirements and supplements
- sensory deficits
- M-1-7 Demonstrate knowledge and ability to assess home environment, family dynamics, and access to resources.
- M-1-8 Demonstrate knowledge and ability to provide compassionate, evidence informed end of life care for pediatric patients integrating palliative principles and values:
  - appropriate palliative analgesia
  - holistic care
  - open dialogue regarding end of life
- spiritual and religious
- symptom management and comfort measures
- M-1-9 Demonstrate knowledge and ability to assess and provide pain management for pediatric patient:
  - physical
  - psychological
  - pharmacological

- cultural influence
- medication history
- subjective and objective data

### N: Mental Health and Addiction

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

### N: Mental Health and Addiction

Competency

N-1: Mental Health and Addiction Nursing and Interventions

- N-1-1 Demonstrate knowledge and application of legislation pertaining to mental health and addictions.
- N-1-2 Demonstrate knowledge and ability to provide evidence informed person-centered care in relation to mental health and addiction nursing:
  - engage patient in plan of care
  - identify role of guardian or agent
  - treatment regimen
- N-1-3 Demonstrate knowledge and ability to recognize mental illness from mental wellness.
- N-1-4 Demonstrate knowledge and understanding of mental health condition or illness:
  - anxiety and adjustment disorders
  - alcohol and substance related disorders
  - dementia and Alzheimer's disease
  - brain injury
  - developmental and spectrum disorders
  - eating disorders

- mood disorders
- personality disorders
- post-traumatic stress disorder
- psychosis related disorders
- suicidal ideation
- N-1-5 Demonstrate knowledge and understanding of developmental and childhood spectrum disorders and the potential future implications for health and wellness.
- N-1-6 Demonstrate knowledge and ability to support patient, family, and others with coping strategies and community-based resources.
- N-1-7 Demonstrate knowledge and ability to perform holistic mental health assessments of patient, family, and groups in a variety of healthcare settings across the continuum of care.
- N-1-8 Demonstrate knowledge and parameters of diagnostic tools used in mental health assessment:
  - Agitated Behavior Scale
  - Diagnostic and Statistical Manual of Mental Disorders Volume 5 (DSM-5)
  - Geriatric Depression Scale

- Mini Mental State Examination (MMSE)
- Montreal Cognitive Assessment (MoCA)
- Screening for Distress and suicide risk
- Sleep Study
- N-1-9 Demonstrate knowledge and ability to assess and manage signs and symptoms of a change in mental health status:
  - behavioral
  - emotional
  - intellectual

- level of alertness and activity
- perception of reality
- suicidal ideation

### N: Mental Health and Addiction

#### Competency

### N-1: Mental Health and Addiction Nursing and Interventions

- N-1-10 Demonstrate knowledge and ability to assess and manage signs and symptoms associated with substance abuse:
  - dependency
  - intoxication

- relapse
- withdrawal
- N-1-11 Demonstrate knowledge and ability to assess and manage mental health and addiction patients with concurrent conditions:
  - acquired immune deficiency syndrome (AIDS)
  - endocrine imbalance
  - hepatitis C

- human immunodeficiency virus infection
- physical or physiological
- pregnancy
- psychotic illness
- N-1-12 Demonstrate knowledge and ability to recognize stressors associated with mental health and addiction:
  - access to resources and services
  - adaptability to change and coping skills
  - behavioral manifestations

- social determinants of health
- stigma
- barriers to recovery
- N-1-13 Demonstrate knowledge and ability to recognize and intervene in crisis situations.
- N-1-14 Demonstrate knowledge and ability to implement or assist with psychosocial interventions as a member of a multidisciplinary team (see Standard of Practice #15, section Z of this document).
  - art and music therapy
  - behavior modification
  - cognitive behavioral therapy
  - drug recovery
  - family therapy
  - motivational therapy

- occupational therapy
- peer and group therapy
- positive and negative reinforcement
- psychoanalysis
- psychotherapy
- N-1-15 Demonstrate knowledge and ability to apply principles of pharmacokinetics and pharmacodynamics specific to medication management in mental health and addiction nursing.
- N-1-16 Demonstrate knowledge and ability to assist with provision of electroconvulsive (ECT) therapy:
  - pre and post procedural assessments and care
  - intraprocedural assessment, monitoring, and care
  - ongoing patient observation

### Major Competency N: Mental Health and Addiction

Competency

N-2: Managing Aggressive Responses

- N-2-1 Demonstrate knowledge and ability to identify physiologic determinants and behavioral predispositions for aggressive patient response towards self and others.
- N-2-2 Demonstrate knowledge and ability to assess signs of potential aggression and implement preventative measures.
- N-2-3 Demonstrate knowledge and ability to apply physical, chemical, or environmental restraints according to appropriate use and employer requirements.
- N-2-4 Demonstrate knowledge and ability to promote safety of self and others when managing aggressive patient responses.
- N-2-5 Demonstrate knowledge and ability to complete post incident management according to employer requirements.

### O: Emergency

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

## Major Competency O: Emergency

Competency

#### **O-1: Emergency Nursing and Interventions**

- O-1-1 Demonstrate knowledge and ability to perform a holistic health assessment:
  - current status

- psychosocial
- health and medication history
- physiological
- O-1-2 Demonstrate knowledge and ability to perform nursing procedures and interventions in an emergency setting according to employer requirements.
- O-1-3 Demonstrate knowledge and ability to obtain, assess, and monitor diagnostic tests and lab values according to employer requirements.
- O-1-4 Demonstrate knowledge and ability through additional education or certification in emergency assessment, intervention, and care:
  - advanced cardiac life support
  - pediatric advanced life support
  - neonatal resuscitation

- critical care and emergency nursing
- trauma nursing and triage
- immunization certificate
- O-1-5 Demonstrate knowledge and ability to perform a rapid primary initial assessment utilizing the Canadian Triage and Acuity Scale (CTAS):
  - Level 1-Resuscitation-threats of life, immediate, aggressive intervention required
  - Level 2-Emergency-potential risk to life or limb, rapid medical intervention required
- Level 3-Urgent-conditions could progress to serious problem requiring emergency intervention
- Level 4-Less Urgent-conditions would benefit from intervention in 1-2 hours to avoid potential deterioration
- Level 5-Non-Urgent-investigations and interventions could be delayed or referred

### P: Gerontology

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

# Major Competency P: Gerontology

#### Competency

#### P-1: Gerontology Nursing and Interventions

- P-1-1 Demonstrate knowledge of effects of the aging process on anatomy and physiology related to health, wellness, and restorative care.
- P-1-2 Demonstrate knowledge and ability to plan, implement, and evaluate healthy living/aging initiatives for individuals, groups, and community.
- P-1-3 Demonstrate knowledge and ability to assess risk and implement safety measures specific to gerontological patient:
  - environmental
  - psychosocial
  - physiological
- P-1-4 Demonstrate knowledge and ability to apply effective interpersonal communication skills with gerontological patient, accommodating for cognitive and sensory changes.
- P-1-5 Demonstrate knowledge of legislation affecting gerontology nursing and the gerontological patient.
- P-1-6 Demonstrate knowledge and ability to create environments and networks that enable healthy aging and restorative care.
- P-1-7 Demonstrate knowledge and ability to assess chronic disease and multisystem health issues:
  - activities of daily living (ADLs)
  - auditory and visual screening
  - bowel and bladder continence
  - Braden scale
  - chronic disease index
  - dementia assessment
  - delirium screening

- elder abuse and neglect screening
- falls risk
- lifestyle choices
- functional assessment
- geriatric depression scale
- nutrition, hydration, and oral health assessment
- Resident Assessment Instrument (InterRAI)
- P-1-8 Demonstrate knowledge and ability to assess pain, provide comfort measures, and pain management:
  - history and physical examination
  - patient appropriate pain scale
  - chronic and acute

## Major Competency P: Gerontology

#### Competency

#### P-1: Gerontology Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

#### P-1-9 Demonstrate knowledge and ability to provide optimum nutrition and hydration:

- adaptive devices and feeding techniques
- allergies, sensitivities, preferences
- conducive environment

- cultural and religious influences
- nutritional requirements and supplements
- oral health and swallowing assessment
- sensory deficits

### P-1-10 Demonstrate knowledge and ability to assess and facilitate elimination needs of gerontological patient:

- observe signs and symptoms
- recognize needs of cognitively impaired
- support bladder and bowel retraining

### P-1-11 Demonstrate knowledge and ability to promote skin integrity and perform skin assessment and wound care.

### P-1-12 Demonstrate knowledge and ability to apply principles of pharmacokinetics and pharmacodynamics specific for gerontological patient:

- multiple prescriptions (polypharmacy)
- medication reconciliation

- non-pharmaceutical and complementary therapies
- interactions and adverse reactions

### P-1-13 Demonstrate knowledge and ability to identify and manage situations and stressors related to elder abuse:

- financial or material
  - limited social services
  - o exploitation or dependence
- physical, psychological, emotional, sexual
  - chronic or debilitating disease
  - o substance abuse and addiction
- neglect or abandonment
- stressors
  - o cultural roles, beliefs, and practices
  - family dynamics
  - o reluctance to report
  - caregiver exhaustion

### P-1-14 Demonstrate knowledge and ability to provide support and resources to gerontological patient, family, and others:

- decision making
- patient behavior and condition change
- healthy lifestyle & quality of life
- Goals of Care and personal directives
- guardianship or trusteeship

- personal loss & bereavement support
- neurocognitive deficit
- palliative and end of life care
- supports for activities of daily living (ADLs)

Major Competency
P: Gerontology

Competency
P-2: Cognitive Care

Competency Statement - A Licensed Practical Nurse will:

#### P-2-1 Demonstrate knowledge and ability to recognize and assess neurocognitive impairment:

- agitation and aggression
- delirium
- dementia

- delusion
- depression
- memory loss

# P-2-2 Demonstrate knowledge and ability to assess and recognize physiological causes for cognitive changes:

- age related changes
- cardiovascular (hypertension, myocardial infarction, coronary artery disease, transient ischemic attack)
- alcoholism and substance use
- stress, anxiety, depression

- fluid and electrolyte imbalance
- diabetes
- infection and sepsis
- pain (observed or perceived)
- vitamin and hormone deficiencies

### P-2-3 Demonstrate knowledge and ability to provide cognitive activities to support healthy lifestyle choices and restorative care:

- promote functional cognition
- provide social activities:
  - o intellectual and mental stimulation
  - o socialization

- integrate additional therapies into care:
  - occupational therapy
  - physiotherapy
  - o recreation therapy

Major Competency
P: Gerontology

Competency
P-3: Dementia Care

Competency Statement - A Licensed Practical Nurse will:

#### P-3-1 Demonstrate knowledge of principles and practices related to dementia care:

- differentiate dementia from cognitive changes of normal aging and delirium
- recognize early, middle, and late phases of dementia
- consider patient preferences and social history
- recognize and manage ethical issues
- collaborate with other health professionals and volunteers

### P-3-2 Demonstrate knowledge and ability to adapt communication to cognitive and emotional needs of patient with dementia:

- address patient by name
- avoid arguing, confrontation
- identify non-verbal expression of physical discomfort and pain
- provide simple choices and redirect
- utilize verbal encouragers and respectful manner

#### P-3-3 Demonstrate knowledge and ability to recognize and manage responsive behaviors:

- identify potential causes or triggers
- protect patient from risk of harm
- promote independence in activities of daily living
- plan prevention or modification strategies
- document and report circumstances related to distress behaviors

## P-3-4 Demonstrate knowledge and ability to promote an optimal environment for patient with dementia focused on safety and independence:

- encourage use of auditory, visual, mobility, and memory aids
- limit use of restraints according to employer requirements (chemical, physical, and environmental)
- provide sheltered freedom:
  - o consistent and individualized routines
  - familiar caregivers
  - appropriate activities
  - reminiscent therapy
  - social interaction (family, pets, intergenerational

# Major Competency P: Gerontology

#### Competency

#### P-4: Assessment and Planning in Continuing Care

Competency Statement - A Licensed Practical Nurse will:

#### P-4-1 Demonstrate knowledge of assessment and care planning tools utilized in continuing care such as:

- Resident Assessment Instrument (RAI)
- Minimum Data Set (MDS) 2.0

### P-4-2 Demonstrate knowledge and ability to utilize assessment and care planning tools as applicable to clinical role.

#### P-4-3 Demonstrate knowledge and ability to coordinate identified patient needs in developing plan of care:

- perform initial and ongoing assessments
- adjust plan of care as necessary
- align data collected with plan of care

# P-4-4 Demonstrate knowledge and ability to manage reporting of data collected through assessment and care planning tools:

- accurate coding of data collected
- submit reporting as required
- monitor and audit data collected
- complete internal and external reports
- effective computer and data entry skills

#### P-4-5 Demonstrate knowledge and ability to evaluate collected data and identify:

benchmarking

- feasibility of future program development
- quality assurance measures
- workload prioritization and scheduling

### **Q: Palliative Care**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

## Major Competency Q: Palliative Care

#### Competency

#### Q-1: Palliative Nursing and Interventions

- Q-1-1 Demonstrate knowledge of the philosophy of a palliative care approach that begins at the onset of a life limiting illness.
- Q-1-2 Demonstrate knowledge and ability to integrate palliative principles and values, standards, and guidelines throughout the dying process across all care settings:
  - based on the dignity and integrity of the therapeutic relationship
  - based on knowledge and research
  - person-centered care
    - o patient identifies members of "family"
    - o respecting needs, expectations, hopes, and goals
    - o recognize each person is unique and valued before and after death
    - o respect autonomy and the right to refuse care
    - o support quality of life as defined by the patient
- Q-1-3 Demonstrate and practice self-reflection, self-awareness, and self-care:
  - recognize personal beliefs and biases
  - develop and maintain personal health, wellness, and professional development
  - provide empathetic, compassionate care
- establish and maintain therapeutic and professional boundaries
- recognize capacity to be in the presence of person and family throughout the dying process
- Q-1-4 Demonstrate knowledge and ability to perform holistic nursing assessment of the palliative care patient:
  - ongoing assessment of physical symptoms and psychosocial well being
  - goals of care and legal directives
- effective communication and collaboration
- advocacy and appropriate referrals
- Q-1-5 Demonstrate knowledge and ability to recognize pattern of decline associated with the dying process.
- Q-1-6 Demonstrate knowledge of signs and symptoms associated with imminent death.
- Q-1-7 Demonstrate ability to provide care for patient, family, and others when death is imminent, at the time of death, and following death.

## Major Competency Q: Palliative Care

#### Competency

#### Q-1: Palliative Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

#### Q-1-8 Demonstrate knowledge and ability to provide psychosocial support:

- create safe, nurturing environment
- communicate with respect, empathy, and compassion
- facilitate conversation regarding goals of care
- encourage expression of feelings, hopes, and concerns
- provide opportunity for patient to reminisce
- respect social, cultural, spiritual values
- respect loss as universal experience
- identify complicated grief and existential stress
- provided appropriate referral

## Q-1-9 Demonstrate knowledge and ability to anticipate, assess, and manage symptoms during the dying process:

- agitation, restlessness, and delirium
- anorexia and cachexia
- dehydration and constipation
- dyspnea and fatigue
- pain and discomfort
- nausea and vomiting

#### Q-1-10 Demonstrated knowledge and ability to enhance physical comfort:

- non-pharmacological comfort measures and comfort rounds
- medications for symptom management
- referrals to palliative care specialist or inter-professional team as necessary

#### Q-1-11 Demonstrate knowledge and ability to recognize and respond to caregiver needs:

- provide compassionate, nonjudgmental support
- respect level of participation in care
- provide information about support services
- respect right to refuse services

- support role as caregiver or decision maker
- support need to balance work and other responsibilities
- respect religious, cultural, and traditional beliefs and practices

### **R: Community Health**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

### **Major Competency**

#### R: Community Health

#### Competency

#### R-1: Community Health Nursing and Interventions

- R-1-1 Demonstrate knowledge and ability to apply the nursing process in community health nursing for individuals, groups, and communities:
  - holistic health assessments
  - program planning

- implementation of services
- evaluation of outcomes
- R-1-2 Demonstrate knowledge and ability to practice in accordance with professional legislation, regulation, and standards for community health nursing.
- R-1-3 Demonstrate knowledge and ability to integrate community and primary health principles, nursing science, social science, and humanities into community health nursing:
  - advocate for patient
  - assess and manage risk
  - assess, identify, and evaluate care goals
  - maintain and restore health
  - practice cultural competence

- promote disease and injury prevention
- promote health, rehabilitation, restoration
- provide palliation
- support care transitions
- R-1-4 Demonstrate knowledge of social determinants of health and how they impact individuals, groups, and communities.
- R-1-5 Demonstrate knowledge of the concepts of health promotion, prevention, and restoration in community health nursing.
- R-1-6 Demonstrate knowledge and ability to provide community health nursing to meet the needs of patients in diverse settings:
  - patient homes and facilities
  - community and street clinics
  - public health centers
  - correctional facilities

- hospices
- nursing outposts
- educational facilities
- youth centers and group homes
- R-1-7 Demonstrate knowledge and ability to provide informal and formal leadership in community health settings:
  - assess and utilize resources
  - promote healthy living environments and networks
  - develop chronic disease management initiatives
  - implement strategic initiatives

- perform triage in various settings
- apply community health principles and practices
- engage community-based resources and experts
- guide individuals and groups in conflict resolution
- facilitate and lead education
- perform management and administrator role

## Major Competency R: Community Health

#### Competency

#### **R-2: Health Promotion and Services**

- R-2-1 Demonstrate knowledge and ability to utilize tools and strategies to address health promotion for individuals, groups, and communities, considering the social determinants of health.
- R-2-2 Demonstrate knowledge and ability to plan and participate in primary, secondary, and tertiary disease prevention:
  - assess risk and prevent onset
  - reduce impact and progression
  - promote rehabilitation and restoration
- encourage healthy lifestyle choices
- promote healthy social and physical environments
- R-2-3 Demonstrate knowledge and ability to recognize and manage safety concerns:
  - implement prevention strategies
  - reduce safety hazards
    - o care environment
    - o unsafe and aggressive behavior
- R-2-4 Demonstrate knowledge and ability to organize and manage patient and family case conferences.
- R-2-5 Demonstrate knowledge and ability to assign, educate and supervise regulated and unregulated providers in community health settings:
  - implement assignment of care
  - ensure continuity of care

- provide mentorship and guidance
- evaluate and reassign as necessary
- R-2-6 Demonstrate knowledge and ability to plan, facilitate, and coordinate access to healthcare services:
  - physician
  - pharmacist
  - social services

- home care services
- allied health professional services
- specialized services
- R-2-7 Demonstrate knowledge and ability to identify and adapt services for at risk individuals, groups, and communities based on the social determinants of health.

## Major Competency R: Community Health

#### Competency

#### R-3: Public Health and Clinic Nursing

- R-3-1 Demonstrate knowledge and ability to participate in public health population assessment and evaluation.
- R-3-2 Demonstrate knowledge and ability to apply community and primary health principles in clinic and public health nursing.
- R-3-3 Demonstrate knowledge and ability to develop and deliver health promotion and disease prevention programs and nursing services for patients and families in public health or clinic settings:
  - Healthy Beginnings Postpartum Program
  - child and youth programs
  - school health programs
  - chronic disease management
  - emergency preparedness and response
  - coordination, consultation, referral
  - injury prevention and rehabilitation
  - infection prevention and control
  - patient triage

- screening and disease prevention
  - o communicable diseases
  - breast and cervical cancer
  - o immunization management
  - Sexually Transmitting Infections
- clinic coordination and management
- specimen collection
  - o cervical (PAP)
  - sexually transmitted infections

### **S: Oncology**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

## Major Competency S: Oncology

#### Competency

#### S-1: Oncology Nursing and Interventions

- S-1-1 Demonstrate knowledge of pathophysiology, disease progression, and treatment of cancers found across the lifespan:
  - autoimmune
  - bone, soft tissue, cutaneous
  - brain and central nervous system
  - breast
  - colorectal
  - endocrine

- gastrointestinal
- genito-urinary
- gynecological
- head and neck
- leukemia, lymphoma, myeloma
- lung
- S-1-2 Demonstrate knowledge of the indications, risk factors, and side effects related to:
  - hormone and biotherapy
  - chemotherapeutic agents
  - combined modalities
  - complementary and alternative therapies
- stem cell transplant
- radiation therapy
- surgery (diagnostic and treatment)
- palliation
- S-1-3 Demonstrate knowledge and ability to manage care related to malignant disease progression:
  - signs and etiology of symptoms
  - co-morbidities
  - complications
  - risk factors and genetic predisposition
  - prognosis

- acute and chronic physical changes
- surgery (diagnosis/treatment)
- treatment modalities
- treatment side effects
- palliation
- S-1-4 Demonstrate knowledge and ability to apply principles of pharmacokinetics and pharmacodynamics specific to medication management in oncology nursing.
- S-1-5 Demonstrate knowledge and ability to assist with invasive treatments and procedures associated with oncology nursing.
- S-1-6 Demonstrate knowledge and ability to assess, monitor, and identify oncologic urgent and emergent events and manage in collaboration with inter-disciplinary team:
  - antidiuretic hormone secretion
  - disseminated intravascular coagulation
  - hemorrhage
  - hypercalcemia
  - malignant bowel obstruction
  - neoplastic cardiac tamponade

- post-surgical complications
- sepsis or febrile neutropenia
- spinal cord compression
- superior vena cava syndrome
- tumor lysis syndrome
- S-1-7 Demonstrate knowledge and ability to support patient navigation of the healthcare system in collaboration with inter-professional team.

### **T: Occupational Health and Safety**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

### Major Competency T: Occupational Health and Safety

Competency

#### T-1: Occupational Health and Safety Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

#### T-1-1 Demonstrate knowledge of concepts of occupational health and safety:

- emergency preparedness and response
- handling of hazardous materials
- health screening and testing
- infection prevention and control
- illness and injury prevention

- disability management
- personal protective equipment
- physical and psychological safety
- wellness and health promotion
- workplace safety

### T-1-2 Demonstrate knowledge and understanding of legislation, regulation, and standards related to occupational health and safety:

- Occupational Health and Safety Act, Regulation, and Code
- Transportation of Dangerous Goods
- Workplace Hazardous Materials Information System (WHMIS)

#### T-1-3 Demonstrate knowledge and obtain competence in:

- audiometric testing
- emergency medical response
- ergonomic assessment
- immunization
- industrial first aid

- spirometry and pulmonary function testing
- vision screening
- hazard and exposure assessment (industrial hygiene)

### T-1-4 Demonstrate knowledge and ability to assess and manage an occupational health and safety culture in the work environment:

- program development, administration, and evaluation
- partner in injury reduction initiatives

#### T-1-5 Demonstrate knowledge and ability to manage workplace illness and injury:

- provide immediate emergency response and treatment
- report according to workers compensation act
- perform post-accident assessments
- assess and manage trends in occupational injury and illness

- support to ill or injured worker
- refer for treatment as appropriate
- collaborate with worker and Workers Compensation Board:
  - o recovery, rehabilitation, retraining
  - o worksite assessment
  - provision of modified work
  - return to work planning

#### T-1-6 Demonstrate knowledge and ability to provide occupational health and safety education and training:

- OHS orientation and training programs
- workplace safety
- hazards and implementing controls

### **U: Medication Management**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

#### Major Competency

#### **U: Medication Management**

#### Competency

#### U-1: Principles of Pharmacology

Competency Statement - A Licensed Practical Nurse will:

#### U-1-1 Demonstrate knowledge of common drug origins:

- animal (hormones, enzymes)
- chemical synthesis (antibiotics, steroidal, radioactive)
- natural (plant, mineral, herbal remedies)

#### U-1-2 Demonstrate knowledge and understanding of the principles of pharmacology:

- pharmacokinetics
  - absorption
  - o distribution

- o metabolism
- excretion

- pharmacodynamics
  - o adverse effect
  - o allergic reaction or anaphylaxis
  - o antagonistic effect
  - o complementary and alternative
    - therapy interactions
  - desired effect

- drug interactions
- drug toxicity
- o duration of action
- idiosyncratic reactions
- synergistic effect
- therapeutic duration

#### U-1-3 Demonstrate knowledge of routes for medication administration:

- gastrointestinal (oral, enteral)
- inhalational
- intra-arterial
- intracerebral
- intradermal
- percutaneous, epicutaneous, subcutaneous

- intramuscular
- intraosseous
- intrathecal
- intravenous
- intravesical
- mucous membranes (sublingual, buccal, nasal, optic, otic, vaginal, rectal)

#### U-1-4 Demonstrate knowledge and understanding of medication action and effect for patients across the lifespan and associated nursing implications:

- indications and contraindications
- interactions
- lab values

- expected outcomes
- risk factors
- adverse reactions and side effects

### U-1-5 Demonstrate knowledge and ability to access credible resources for information and research related to medications prior to administration.

## Major Competency U: Medication Management

### Competency U-1: Principles of Pharmacology

- U-1-6 Demonstrate knowledge and ability to apply infection prevention and control standards in safe storage, handling, removal, and disposal of medications according to employer requirements:
  - antineoplastic
  - autoimmune
  - cytotoxic
  - biological
  - hormones

- insulin
- narcotics
- known hazardous
- vasodilators
- bronchodilators
- U-1-7 Demonstrate knowledge and ability to perform drug counts on controlled medications according to employer requirements:
  - maintain accurate record
  - accurately record addition and/or removal
- participate in shift count and accurately record inventory
- co-sign waste of controlled medication
- U-1-8 Demonstrate knowledge and ability to report adverse events and medication errors according to legislation and employer requirements.

### Major Competency

#### **U: Medication Management**

#### Competency

#### U-2: Medication Preparation and Administration

Competency Statement - A Licensed Practical Nurse will:

#### U-2-1 Demonstrate knowledge and understanding of the National and Alberta Drug Schedules:

- Schedule 1: drugs requiring a prescription as a condition of sale
- Schedule 2: drugs available without a prescription but must be obtained from a pharmacist
- Schedule 3: drugs available without a prescription from the self-selection section of a pharmacy
- Unscheduled: drugs not listed in a National or Provincial schedule and may be sold from any retail outlet

### U-2-2 Demonstrate knowledge and ability to accept, process, verify, and initiate written, verbal, telephone, or electronic medication orders considering:

- date and time prescribed
- patient's full name
- medication name, strength, and dosage
- route, frequency, duration

- authorized prescriber (name, signature, designation)
- order is accurate, appropriate, and complete
- follow up with authorized prescriber as necessary
- U-2-3 Demonstrate knowledge and ability to accurately calculate dosages, concentrations, rates, and volumes using formulas and standards of measurement associated with medication administration.
- U-2-4 Demonstrate knowledge and ability to perform patient assessment prior to medication administration.
- U-2-5 Demonstrate knowledge and ability to appropriately prepare medications for administration according to principles of safe medication preparation and employer requirements.
- U-2-6 Demonstrate knowledge and ability to apply the "rights" and "checks" of medication administration to reduce risk of medication error and ensure patient safety.

# U-2-7 Demonstrate knowledge and ability to adhere to employer requirements and procedure for safe administration of medication by:

- gastrointestinal (oral, enteral)
- inhalational
- intradermal
- percutaneous, epicutaneous, subcutaneous
- intramuscular
- intravenous (continuous, intermittent, direct)
- mucous membranes (sublingual, buccal, nasal, optic, otic, vaginal, rectal)
- intravesicular (bladder instillation)

## Major Competency U: Medication Management

#### Competency

#### U-2: Medication Preparation and Administration

A Licensed Practical Nurse will:

- U-2-8 Demonstrate knowledge and ability to adhere to employer requirements when monitoring patient receiving medication administration by:
  - intraosseous

intra-arterial

intrathecal

- intracerebral
- U-2-9 Demonstrate knowledge and ability to monitor, evaluate, and document medication effectiveness.
- U-2-10 Demonstrate knowledge and ability to recognize and manage adverse medication reactions and anaphylaxis:
  - identify signs and symptoms
  - implement protocol according to employer requirements
- U-2-11 Demonstrate knowledge and ability to administer nitrous oxide (see Standards of Practice #14, section Z of this document):
  - identify risks and precautions
  - manage adverse reactions
  - provide ongoing monitoring
- U-2-12 Demonstrate knowledge and ability to administer diagnostic imaging contrast agents (see Standards of Practice #13, section Z of this document):
  - identify the different types
  - identify risks and precautions
- manage adverse reactions
- provide ongoing monitoring

#### **Major Competency**

### **U-3: Medication Management**

#### Competency

#### U-3: Immunization and Communicable Disease Control

Competency Statement - A Licensed Practical Nurse will:

- U-3-1 Demonstrate knowledge and understanding of the immunization restricted activity in the Health Professions Act's Licensed Practical Nurses Profession Regulation.
- U-3-2 Demonstrate knowledge and ability to provide immunization in accordance with professional legislation, regulation, standards, and guidelines (see Standards of Practice #5, section Z of this document).

**LPN Profession Regulation:** 

section 13(1) A regulated member may, in the practice of licensed practical nursing, perform the following restricted activities in accordance with the standards of practice:

(c) administering vaccines for the purpose of providing immunizations where the recipient of the immunization is 5 years of age or older

#### **Major Competency**

#### **U-3: Medication Management**

#### Competency

#### U-3: Immunization and Communicable Disease Control

- U-3-3 Demonstrate knowledge of immunity and principles of infectious disease prevention and control.
- U-3-4 Demonstrate knowledge of anatomy, physiology, pathophysiology related to infectious diseases.
- U-3-5 Demonstrate knowledge of national and provincial legislation, regulation, schedules, and standards of immunization.
- U-3-6 Demonstrate knowledge of immunization schedules and prevention of infectious disease for:
  - infants
  - children
  - adults

- seniors
- population specific
- U-3-7 Demonstrate knowledge of the action, purpose, uses, and nature of common immunizing and biological products.
- U-3-8 Demonstrate knowledge and ability to identify the factors which affect the action of immunizing and biological products.
- U-3-9 Demonstrate knowledge and ability to identify and report side effects, adverse events, and contraindications related to immunization and biological products.
- U-3-10 Demonstrate knowledge and ability to maintain the cold chain in the transportation and storage of immunizing and biological products.
- U-3-11 Demonstrate knowledge and ability to identify basis for administration of an immunizing or biological product.
- U-3-12 Demonstrate knowledge and ability to review pertinent health information prior to immunization.
- U-3-13 Demonstrate knowledge and ability to identify risk factor and contraindications to immunization and report.
- U-3-14 Demonstrate knowledge and ability to document patient assessment and report any risks and contraindications.
- U-3-15 Demonstrate knowledge and ability to provide patient teaching to obtain informed consent for immunization:
  - name of immunizing and biological product
  - infectious disease prevention
  - benefits of immunization

- risks and side effects
- wait time following immunization
- emergency contact

## Major Competency U-3: Medication Management

#### Competency

#### U-3: Immunization and Communicable Disease Control

- U-3-16 Demonstrate knowledge and ability to perform safe preparation, transportation, and administration of immunizing and biological products.
- U-3-17 Demonstrate knowledge and ability to apply the "rights and checks" of medication administration when administering immunizing and biological products to reduce risk of medication error and ensure patient safety.
- U-3-18 Demonstrate knowledge and ability to prepare immunizing and biological product from vial or ampule for injection.
- U-3-19 Demonstrate knowledge and ability to landmark injection site and use proper technique to administer intradermal, subcutaneous, and intramuscular injections.
- U-3-20 Demonstrate knowledge and ability to properly dispose of sharps and maintain infection prevention and control standards.
- U-3-21 Demonstrate knowledge and ability to record immunizing or biological product administration and patient response.
- U-3-22 Demonstrate knowledge and ability to document and report adverse effects from immunizing or biological product.

### **V: Infusion Therapy**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

#### Competency

#### V-1: Principles and Administration of Infusion Therapy

Competency Statement - A Licensed Practical Nurse will:

#### V-1-1 Demonstrate knowledge of principles of infusion therapy related to:

- circulatory system
  - o arterial
  - venous
- blood and blood products
- chemotherapy

- fluid and electrolyte maintenance, restoration, and replacement
- infection prevention and control
- medications and nutritional feedings

# V-1-2 Demonstrate knowledge of principles of peripheral lines, central lines, implanted ports, spinals, epidurals, and patient controlled analgesia.

#### V-1-3 Demonstrate knowledge and ability to manage peripheral intravenous infusion therapy:

- initiate, monitor, regulate, lock discontinue
  - o assemble and prime lines
  - o calculate infusion rates
  - patient safety

- infusion equipment
- o administration of fluids and medications
- o treatment evaluation

#### V-1-4 Demonstrate knowledge and ability to manage patient controlled analgesia pump (PCA pumps):

- initiate, regulate, monitor
- lock, discontinue

#### V-1-5 Demonstrate knowledge and ability to manage complications of peripheral intravenous therapy:

- air emboli
- allergic reactions
- dehydration or hypervolemia
- equipment problems

- infection
- infiltration or extravasation
- phlebitis or thrombophlebitis

#### V-1-6 Demonstrate knowledge and ability to manage hypodermoclysis infusion:

- initiate, monitor, regulate, lock discontinue
  - assemble and prime lines
  - o calculate infusion rates
  - patient safety

- o infusion equipment and pump
- o administration of fluids and medications
- V-1-7 Demonstrate knowledge and ability to manage complications of hypodermoclysis infusion:
  - allergic reactions
  - edema
  - equipment problems
  - fluid or medication error

- hypervolemia
- infection
- localized pain
- infiltration or extravasation

#### Competency

#### V-2: Central Line Management

Competency Statement - A Licensed Practical Nurse will:

- V-2-1 Demonstrate knowledge of central venous catheter (CVC) lines and clinical application:
  - tunneled and non-tunneled
  - peripheral or percutaneous (PICC)
- subcutaneous port or implanted vascular access device (IVAD)
- V-2-2 Demonstrate knowledge and ability to recognize and manage risks associated with central lines:
  - abnormal heart rate or rhythm
  - line blockage
  - brachial plexus injury
  - embolus or thrombus

- faulty or fractured device
- hemorrhage and hematoma
- incorrect placement
- infection and sepsis
- V-2-3 Demonstrate knowledge and ability to recognize and manage risks associated with removal of central venous catheters:
  - abnormal heart rate or rhythm
  - embolus or thrombus
  - brachial plexus injury

- faulty or fractured device
- hemorrhage and hematoma
- infection and sepsis
- V-2-4 Demonstrate knowledge and ability to monitor and manage central lines according to employer requirements:
  - dressing changes
  - cap and tubing change
  - flush and lock
  - maintain central venous pressure
- administration of fluids
- occlusion issues
- patient controlled analgesia pump (PCA)
- withdraw blood
- V-2-5 Demonstrate knowledge and ability to administer medications (continuous, intermittent, direct) via central venous line according to employer requirements (see Standards of Practice #17, section Z of this document).
- V-2-6 Demonstrate knowledge and ability to remove non-tunneled central venous catheters according to employer requirements.

#### LPN Profession Regulation:

section 16 (1) A regulated member who has completed advanced training approved by the Registrar and has been specially authorized to do so by the Registrar on the basis of that train may, in the practice of licensed practical nursing, perform the following restricted activities in accordance with the standards of practice:

(b) administering medication by an invasive procedure on body tissue below the dermis for the purpose of administering medication into a central venous line, peripherally inserted central catheter or and implanted venous access device.

### Competency

#### V-3: Blood and Blood Products

- V-3-1 Demonstrate knowledge of the circulatory system and components of blood and blood products used in transfusion therapy.
- V-3-2 Demonstrate knowledge of blood typing groups and considerations related to blood cross-matching.
- V-3-3 Demonstrate knowledge of normal and abnormal lab values pertaining to blood transfusion.
- V-3-4 Demonstrate knowledge of types of transfusions according to composition and clinical indications:
  - albumin
  - cryoprecipitate
  - factor IX and VIII concentrate
  - immunoglobulin
  - packed red blood cells

- packed white blood cells
- plasma (fresh, frozen, and single donor)
- platelets
- whole blood
- V-3-5 Demonstrate knowledge and ability to obtain informed consent prior to transfusion of blood products, understanding and respecting:
  - ethical, cultural, and religious beliefs
  - legal right to refuse
- V-3-6 Demonstrate knowledge and ability to prepare and administer blood and blood products via transfusion (See Standard of Practice #6, section Z of this document):
  - obtain blood or blood products
  - check blood or blood products with another authorized professional
- set up and prime infusion lines
- monitor, regulate, and discontinue
- V-3-7 Demonstrate knowledge and ability to identify and manage a reaction to blood or blood products:
  - anaphylaxis
  - abdominal pain or nausea
  - acute respiratory condition (dyspnea, pulmonary)
  - chest, flank, or back pain
  - circulatory overload
  - elevated blood pressure

- embolus
- fever or chills
- altered mental state (anxious, drowsy)
- altered skin color and appearance (urticaria, jaundice)
- urine output and color

### Competency V-4: Epidural and Spinal Infusion

Competency Statement - A Licensed Practical Nurse will:

#### V-4-1 Demonstrate knowledge of epidural and spinal infusion therapy:

- regional anesthesia (pain block)
- infusion rates
- patient safety

- infusion equipment
- neurological assessment
- fluids and medications

# V-4-2 Demonstrate knowledge and ability to manage problems and complications of epidural and spinal infusion therapy:

- abnormal lab values
- allergic and adverse reactions
- equipment issues, line occlusion, or disconnection
- hemorrhage
- fever or infection

- infiltration
- inadequate analgesia
- respiratory depression
- urinary retention
- hypotension
- post epidural cerebrospinal fluid leak

### V-4-3 Demonstrate knowledge and ability to manage patient care following epidural or spinal infusion therapy.

V-4-4 Demonstrate knowledge and ability to monitor and regulate epidural infusions.

Note: Licensed Practical Nurses are not authorized to initiate or remove epidural and spinal catheters.

	Major Competency	
V: Infusion Therapy		

Competency V-5: Peritoneal Dialysis

- V-5-1 Demonstrate knowledge of indications and risks associated with peritoneal dialysis.
- V-5-2 Demonstrate knowledge and ability to monitor and manage peritoneal catheter site.
- V-5-3 Demonstrate knowledge and ability to perform procedures involved in peritoneal dialysis:
  - initiate, monitor, and discontinue
  - intra-peritoneal medication administration
- V-5-4 Demonstrate knowledge and ability to calculate patient's creatinine and urea clearance.

Competency V-6: Hemodialysis

Competency Statement - A Licensed Practical Nurse will:

- V-6-1 Demonstrate knowledge and understanding of the dialysis (hemodialysis) restricted activity in the Health Professions Act's Licensed Practical Nurses (LPN) Profession Regulation.
- V-6-2 Demonstrate knowledge and ability to provide dialysis (hemodialysis) in accordance with professional legislation, regulation, CLPNA standards and any applicable guidelines (see Standards of Practice #16, section Z of this document).

LPN Profession Regulation:

section 16 (1) A regulated member who has completed advanced training approved by the Registrar and has been specially authorized to do so by the Registrar on the basis of that train may, in the practice of licensed practical nursing, perform the following restricted activities in accordance with the standards of practice:

(a) inserting or removing instruments, devices, fingers or hands into an artificial opening into the body for the purposes of performing dialysis.

- V-6-3 Demonstrate knowledge of anatomy, physiology, and pathophysiology associated with the disease process of acute and chronic renal insufficiency.
- V-6-4 Demonstrate knowledge and understanding of principles of hemodialysis equipment management:
  - osmosis, diffusion, ultrafiltration
  - assembly of equipment and hemodialysis circuit
- identify, respond, and report equipment issues and alarms
- infection prevention and control standards
- monitor water treatment process
- V-6-5 Demonstrate knowledge and ability to assess and maintain hemodialysis access:
  - arteriovenous fistula (AV fistula)
  - arteriovenous graft (AV graft)
- central venous catheters (jugular, subclavian, femoral)
- V-6-6 Demonstrate knowledge and ability to initiate, monitor, and discontinue hemodialysis treatment according to employer requirements.

Competency V-6: Hemodialysis

Competency Statement - A Licensed Practical Nurse will:

### V-6-7 Demonstrate knowledge and ability to assess and manage complications associated with hemodialysis:

- anaphylaxis
- hypoglycemia or hyperglycemia
- cardiac dysrhythmia, angina, cardiac arrest
- disequilibrium syndrome (neurological deficits)
- dehydration or hypervolemia
- edema (periorbital, peripheral, sacral)
- electrolyte abnormalities
- encephalopathy
- fatigue or lethargy

- hemorrhage, thrombosis, aneurysm
- hypotension or hypertension
- infection (site, systemic, peritonitis)
- nausea, vomiting, diarrhea
- pericarditis, pericardial effusion, tamponade
- peripheral ischemia, neuropathy, neuropathic pain
- peripheral vascular disease
- renal osteodystrophy
- respiratory distress
- uremic pruritis

## V-6-8 Demonstrate knowledge and ability to provide treatments, interventions, and education to hemodialysis patients:

- monitoring and discontinuation of blood and blood product infusion
- care of vascular access (central, fistula, graft)
- renal diet and fluid and electrolyte management
- immunizations
- medication management
- obtain samples and specimens

### **W: Self Employed Practice**

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

# Major Competency W: Self-Employed Practice

#### Competency

#### W-1: Regulation and Accountability

Competency Statement - A Licensed Practical Nurse will:

# W-1-1 Demonstrate knowledge and ability to practice in accordance with professional legislation, regulation, standards, and guidelines in self-employed practice:

- Health Professions Act
- Licensed Practical Nurses Profession Regulation
- Standards of Practice

- Code of Ethics
- Competency Profile for Licensed Practical Nurses
- College of Licensed Practical Nurses of Alberta Practice & Policy Documents

#### W-1-2 Demonstrate knowledge and ability to adhere to relevant Acts for self-employed practice:

- Child, Youth, and Family Enhancement Act
- Long Term Care Act

- Mental Health Act
- Public Health Act
- Workers' Compensation Act

# W-1-3 Demonstrate knowledge and ability to comply with legislation affecting information management in self-employed practice:

- Personal Information Protection Act (PIPA)
- Health Information Act (HIA)
- Freedom of Information and Protection of Privacy Act (FOIP)
- Personal Information Protection and Electronic Documents Act (PIPEDA)

# W-1-4 Demonstrate knowledge and ability to practice within boundaries established by professional, ethical, and business standards:

- accountability and responsibility
- duty to provide care
- legal counsel and liability coverage
- marketing and management
- therapeutic nurse patient relationship
- maintain competence through professional development
- maintain professional and business license

#### W-1-5 Demonstrate knowledge of business liability insurance required for self-employed practice.

# Major Competency W: Self-Employed Practice

#### Competency

#### W-2: Nursing Services and Interventions

Competency Statement - A Licensed Practical Nurse will:

## W-2-1 Demonstrate knowledge and ability to provide person-centered care in the delivery of self-employed services:

- apply research in practice
- promote dignity and well being
- serve as an advocate

#### W-2-2 Demonstrate knowledge and ability to offer a variety of services:

- consultation
- direct care

- health promotion and illness prevention
- research

# W-2-3 Demonstrate knowledge and ability to develop and manage policies and procedures for self-employed practice:

- business plan and advertising
- patient complaint process
- conflict of interest (patient or personal benefit)
- contract agreements

- business and financial records
- human resources
- infection prevention and control standards
- termination of services

#### W-2-4 Demonstrate knowledge and ability to manage information according to the following principles:

- accurate record of services provided
- confidentiality of patient information
- documentation of patient consent and/or signed business contract
- expected and actual outcomes of nursing services
- secure storage, retention, and authorized release of patient information

#### W-2-5 Demonstrate knowledge and ability to initiate referral to other healthcare professionals as required.

## X: Dermatology and Aesthetic Nursing

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

#### Major Competency

#### X: Dermatology and Aesthetic Nursing

#### Competency

#### X-1: Dermatology and Aesthetic Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

- X-1-1 Demonstrate knowledge of anatomy, physiology, and microbiology related to dermatology and aesthetic interventions and nursing care.
- X-1-2 Demonstrate knowledge and ability to apply infection prevention and control standards in dermatology and aesthetic nursing.
- X-1-3 Demonstrate knowledge and ability to obtain informed consent and maintain documentation throughout care delivery.
- X-1-4 Demonstrate knowledge of risks and precautions associated with dermatology and aesthetic procedures.
- X-1-5 Demonstrate knowledge and ability to perform dermatology and aesthetic procedures and treatments:
  - neuromodulator injections (Botox)
  - chemical peels
  - cosmetic filler injections
  - cryosurgery and cantharone treatment
  - laser or chemical hair removal
  - intralesional treatment
  - laser therapy for vascular abnormalities, birth marks, warts, scarring, resurfacing
- microdermabrasion
- photodynamic therapy
- punch and scissor biopsy above the dermis
- shave biopsy-electrodessication and curettage
- specimen collection
- suturing-above the dermis, closure, and removal
- X-1-6 Demonstrate knowledge and ability to assist physician with Mohs Micrographic surgery according to employer requirements.
- X-1-7 Demonstrate knowledge and ability to apply pharmacokinetics and pharmacodynamics in management of medications used in Dermatology and Aesthetic Nursing.
- X-1-8 Demonstrate knowledge and ability to apply principles of medication management in storage, handling, preparation, and administration of medications used in Dermatology and Aesthetic nursing.
- X-1-9 Demonstrate knowledge and ability to assess and monitor patient throughout and following dermatology treatment.

Note: Licensed Practical Nurses working in dermatology and aesthetic practice settings must have direct or indirect supervision from a physician or nurse practitioner trained in dermatology and aesthetic practice who is on-site and available to assist.

Note: Licensed Practical Nurses performing laser treatments require laser equipment certification and must verify competence within the practice setting.

## Y: Ophthalmology

**Please note:** Competencies within this section of the Profile are to be taken in consideration with competencies outlined throughout this document and are not intended to be standalone.

**Important**: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these competencies.

# Major Competency Y: Ophthalmology

#### Competency

#### Y-1: Ophthalmic Nursing and Interventions

Competency Statement - A Licensed Practical Nurse will:

- Y-1-1 Demonstrate knowledge of anatomy, physiology, and pathophysiology related to ophthalmic diseases and disorders.
- Y-1-2 Demonstrate knowledge of invasive and non-invasive ophthalmic treatments, procedures, and surgeries.
- Y-1-3 Demonstrate knowledge and ability to provide ophthalmic nursing treatments according to employer requirements:
  - procedures and protocols
  - ophthalmic diagnostics
  - equipment and technology
- Y-1-4 Demonstrate knowledge and ability to assist during ophthalmic procedures and surgeries:
  - review patient information and consent
  - explain procedure to the patient
  - prepare instrument
  - sterile hand scrub and gowning
  - position patient
  - prepares surgical site and drape patient
  - provide assistance to anesthetist and surgeon
- prepare and administer medication as required
- manage complications as required
- dress surgical site
- participate in count of instruments and supplies
- ongoing monitoring of patient
- collect, label, and disperse specimens
- Y-1-5 Demonstrate knowledge and ability to assist with laser procedures:
  - manage laser safety protocols
  - calibrate and set laser equipment
- Y-1-6 Demonstrate knowledge and ability to manage patient recovery following ophthalmic surgery or laser treatment.

Note: Licensed Practical Nurses providing ophthalmic nursing procedures and interventions require employer education and certification and/or have Advanced Practice Perioperative Nursing.

**Z: Standards of Practice for Performing Restricted Activities** and Advanced Practice



# STANDARDS OF PRACTICE FOR LICENSED PRACTICAL NURSES ON RESTRICTED ACTIVITIES AND ADVANCED PRACTICE

Approved by the Council and came into force on February 1, 2020

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## INTRODUCTION

The Licensed Practical Nurses Profession Regulation (LPN Regulation) details the restricted activities that licensed practical nurses (LPNs) are authorized to perform. Changes to the LPN Regulation effective February 1, 2020 are intended to optimize the role that LPNs have in healthcare provision. The College of Licensed Practical Nurses of Alberta (CLPNA) is required to create standards of practice explaining the minimum requirements of LPNs performing restricted activities.

Terms found in the glossary are **bolded** where they appear for the first time in this document.

#### **Purpose**

The purpose of the Standards of Practice for Licensed Practical Nurses on Restricted Activities and Advanced Practice (2019) is to outline minimum standards and expectations an LPN must adhere to when performing restricted activities and advanced practice. These standards provide clarification and direction on the provision of a restricted activity and performing in an area of advanced practice.

#### **Understanding Restricted Activities**

Schedule 7.1 of the *Government Organization Act* outlines health services restricted activities. **Regulated health professionals** are authorized by their professional regulation to perform restricted activities. An LPN is authorized to perform the restricted activities outlined in the LPN Regulation and in accordance with requirements in standards of practice (please see Appendix A for the list of authorized restricted activities in the LPN Regulation).

## Understanding the LPN Scope of Practice for Restricted Activities

The LPN scope of practice includes restricted activities laid out in the LPN Regulation. There are certain parameters an LPN must follow when performing a restricted activity. For more information about the requirements for an individual restricted activity, please see the appropriate standard(s) in this document.

#### Performing a Restricted Activity

Prior to performing any restricted activity, the LPN must ensure:

- 1. The restricted activity is authorized by the LPN Regulation and standards of practice;
- 2. The restricted activity is appropriate within the context of the practice of practical nursing;
- 3. They have the **competence** and **competencies** needed to perform the restricted activity from their entry-level practical nursing education or from advanced education or training;
- 4. Advanced authorization is obtained (if required);
- 5. The LPN's employer supports the LPN performing the restricted activity;
- 6. Other required supports and/or resources are available to perform the restricted activity safely in that specific practice setting; and
- 7. They are demonstrating evidence informed clinical judgment and decision making.

#### The LPN must follow section 20 of the LPN Regulation which states:

"Despite any of the authorizations to provide restricted activities, regulated members must restrict themselves in performing restricted activities to those activities that the member is competent to perform and to those that are appropriate to the member's area of practice and the procedures being performed."

An LPN may be authorized to perform the restricted activity, however, the LPN must ensure they have the knowledge, skill, and ability to do so in that specific situation and environment. If the LPN does not, they are responsible to seek assistance to ensure the client receives the required care. Supervision of restricted activities is outlined in this document where necessary.

## **Understanding Advanced Authorization**

Certain restricted activities require advanced training or education and authorization by the Registrar prior to the LPN performing them. For information about advanced training and applying for and receiving advanced authorization please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

An LPN is only required to take advanced training or education if they are going to perform one or more of the below restricted activities.

An LPN must receive advanced authorization by the Registrar prior to performing any of the following restricted activities:

- 1. **Medication** administration via a central venous line (central venous catheter (CVC), peripherally inserted central catheter (PICC), or implanted venous access device (IVAD));
- 2. Inserting or removing instruments, devices, fingers, or hands into an artificial opening into the body for the purposes of hemodialysis;
- 3. Administering parenteral nutrition;
- 4. Cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis for the purpose of removing a corn or callus as part of the provision of foot care;
- 5. Cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis for the purpose of performing activities under the direction of an authorized practitioner performing surgery; and
- 6. Setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts.

## **Understanding LPN Advanced Practice**

Areas of advanced practice require advanced training or education and authorization by the Registrar to perform. For information about the advanced training and applying for and receiving advanced authorization please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

An LPN is only required to take advanced training or education if they are going to perform one or more of the above areas of advanced practice. An LPN must receive advanced authorization by the Registrar prior to practicing in the following areas of advanced practice:

- Advanced Practice Foot Care;
- Advanced Practice Perioperative Nursing; and
- Advanced Practice Orthopedic Nursing.

## Learning and Supervision of a Restricted Activity

Section 21 of the LPN Regulation outlines who LPNs may supervise for the purposes of learning and performing restricted activities. LPNs may supervise other LPNs and unregulated individuals.

Section 21(1) of the LPN Regulation describes:

- Any LPN registered with the CLPNA and who is receiving training or education in activities requiring advanced authorization, may perform the restricted activity under the supervision of:
  - another LPN who is authorized by the Registrar to perform the individual restricted activity being learned; or
  - another **authorized practitioner** who is authorized and competent to perform the individual restricted activity being learned.

Sections 21(2) and 21(3)¹ of the LPN Regulation authorizes LPNs to supervise practical nursing students and unregulated individuals so long as the LPN has the training and competence to perform the individual restricted activity being learned and the LPN is available to provide assistance. The LPN providing supervision must ensure that all supervision requirements of an individual restricted activity are met. For information about supervision requirements for an individual restricted activity, please see the appropriate standard(s) in this document.

#### Standards of Practice

The *Health Professions Act* (HPA) requires that all regulated health professions establish standards of practice. An LPN is accountable to meet the standards of practice which are the expected minimum standards of care that promote safe, competent, and ethical practice.

In addition to the standards contained in this document, the CLPNA standards of practice include and may not be limited to:

- Standards of Practice for Licensed Practical Nurses in Canada (Canadian Council for Practical Nurse Regulators, 2020);
- Standards of Practice on Boundary Violations: Protecting Patients from Sexual Abuse and Sexual Misconduct (CLPNA, 2019);
- Reusable & Single-Use Medical Devices Standard (Government of Alberta, 2019); and
- Decision-Making Standards for Nurses in the Supervision of Health Care Aides (CARNA, CLPNA, CRPNA 2010).

The Standards of Practice for Licensed Practical Nurses in Canada is the overarching standard of practice that every Alberta LPN must meet when providing nursing care. Along with these overarching standards, an LPN must adhere to all the standards of practice that are relevant to the care they are providing, including performing restricted activities. 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.

Other key documents which govern LPNs include but are not limited to the:

- Competency Profile for Licensed Practical Nurses of Alberta; and
- Code of Ethics for Licensed Practical Nurses in Canada, (CCPNR, 2013).

An LPN is responsible to have knowledge of these documents and to apply them to their nursing practice, regardless of practice setting or areas of responsibility.

<sup>&</sup>lt;sup>1</sup> LPNs are authorized to supervise an unregulated individual to perform restricted activities of inserting and removing instruments, devices, fingers, or hands beyond the opening of the labia majora or anal verge.

# COMMON STANDARDS FOR ALL RESTRICTED ACTIVITIES AND AREAS OF ADVANCED PRACTICE

An LPN must follow all standards of practice that apply to the individual restricted activity they are performing. Below are Education and Practice Standards that are common across all restricted activities and areas of advanced practice.

Appendix D contains the "Overview Table for Standards of Practice on Restricted Activities and Advanced Practice". LPNs are required to know all information contained within these standards of practice, but the table provides a quick reference guide on requirements and where to find all pertinent information in this document.

#### **STANDARD 1:** Common Education Standards

Prior to performing any restricted activity or area of advanced practice, the LPN must:

- 1.1 have education or training to perform the restricted activity attained through:
  - 1.1.1 a CLPNA Council approved practical nurse entry-level education program or equivalent entry-level training that includes education for the restricted activity they are performing; or
  - 1.1.2 post entry-level training or education for the restricted activity they are performing;
- 1.2 pass the CLPNA module, *Understanding Restricted Activities*, or have graduated from a practical nurse entry-level education program in Alberta after June 2022;
- 1.3 possess and maintain the competencies as set out in the CLPNA Competency Profile for the individual restricted activity; and
- 1.4 have the knowledge and competence to perform the restricted activity safely, including the competence to use the specific equipment and technology required to perform the restricted activity.

#### **STANDARD 2:** Common Practice Standards

When performing any restricted activity or area of advanced practice, the LPN must:

- 2.1 have CLPNA authorization to perform the individual restricted activity;
- 2.2 be accountable for their practice including safe and competent performance;
- 2.3 only perform restricted activities that are appropriate to the LPN's area of practice and the procedures being performed;
- 2.4 identify and respond to risks, indications, contraindications, and required precautions prior to performing the individual restricted activity;
- 2.5 follow employer requirements and best practices related to performing the individual restricted activity;

- 2.6 inform and educate the client regarding the nature, purpose, and expected outcomes including any required follow up care;
- 2.7 obtain informed consent from the client or alternate decision maker prior to performing the individual restricted activity;
  - 2.7.1 In rare or emergent situations, it may not be possible to obtain consent prior to the LPN performing the restricted activity. In this situation, the consent must be obtained as soon as possible from the patient or alternate decision maker;
- 2.8 apply infection prevention and control best practices in accordance with legislative requirements, CLPNA standards, and employer requirements;
- 2.9 monitor and evaluate the client's response to the restricted activity;
- 2.10 competently respond to any adverse event and ensure it is communicated to the appropriate health care professional in a timely manner;
- 2.11 report and document according to legislation, employer requirements, and CLPNA policies related to any aspect of performing the individual restricted activity;
- 2.12 be responsible and accountable in ensuring safe, ethical, and competent care; and
- 2.13 adhere to all CLPNA standards of practice and the CLPNA code of ethics.

## STANDARDS FOR INDIVIDUAL RESTRICTED ACTIVITIES

An LPN obtains the required competencies to perform many authorized restricted activities through the entry-level practical nurse diploma program or equivalent entry-level training. The competency requirements for individual restricted activities are included under various sections throughout the CLPNA Competency Profile. Below are standards for authorized restricted activities for all regulated members on all register categories.

The LPN Regulation section number is noted at the beginning of each individual restricted activity.

Note: Some of the following restricted activities may require additional training for LPNs who graduated from an Alberta practical nursing program prior to June 2022. A CLPNA module is available. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

Section 13(1)(a): Inserting or removing instruments, devices, fingers or hands:

- 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

#### **Practice Overview:**

The insertion or removal of instruments, devices, fingers, or hands is part of many areas of LPN practice. Some examples of these activities include urinary catheterization; ostomy care; endotracheal suctioning; enema administration; and insertion of a rectal or vaginal suppository, an otoscope, or a nasogastric tube.

Note: Please refer to Standard 16 for expectations for the insertion of instruments, devices, fingers, or hands related to hemodialysis.

#### STANDARD 3: Inserting or removing instruments, devices, fingers, or hands

When an LPN performs a nursing intervention that involves the insertion or removal of instruments, devices, fingers, or hands beyond the body parts indicated above, the LPN must:

3.1 adhere to common education and practice standards (Standards 1 and 2).

Section 13(1)(b): Administering anything by an invasive procedure on body tissue below the dermis for the purpose of administering injections or for starting a peripheral intravenous line

#### Practice Overview:

An LPN prepares, initiates, administers, monitors, titrates, and discontinues the delivery of fluids and medications via invasive routes (e.g. injections and infusions). Invasive routes include intravenous, intradermal, intramuscular, and subcutaneous. Administration of medications by non-invasive routes such as oral, topical, and transdermal is not a restricted activity.

Note: Please refer to Standard 17 on administering medication by central venous line (CVC), peripherally inserted central catheter (PICC), or an implanted venous access device (IVAD).

**STANDARD 4:** Administering fluids or medication via invasive procedure: intravenous (IV), intradermal (ID), intramuscular (IM), and subcutaneous (SC) routes

When an LPN administers fluids or medications by invasive procedure, the LPN must:

- 4.1 adhere to common education and practice standards (Standards 1 and 2);
- 4.2 follow an authorized prescriber order or medically approved protocol prior to fluid or medication administration; and
- 4.3 adhere to all rights and checks of medication administration as set out in the CLPNA Competency Profile and CLPNA policy.

Section 13(1)(c): Administering vaccines for the purpose of providing immunizations where the recipient of the vaccine is 5 years of age or older

#### Practice Overview:

An LPN is authorized to administer vaccines for immunization to clients 5 years of age and older. An LPN must ensure that they have the knowledge, skill, judgment, and competencies related to the concepts and principles of immunity, communicable disease control, immunization, as well as legislative and reporting requirements.

Note: Immunization was previously an LPN specialty practice in Alberta. If you did not previously hold the immunization specialty you must complete additional training prior to immunizing clients 5 years of age or older.

Note: Immunization may require additional training or education for LPNs who graduated from an Alberta practical nursing program prior to June 2022 or from another jurisdiction. A CLPNA module is available. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

#### STANDARD 5: Administering vaccines to immunize clients 5 years of age or older

When administering a vaccine to a client (5 years or older) the LPN must:

- 5.1 adhere to common education and practice standards (Standards 1 and 2);
- 5.2 have working knowledge of CLPNA Immunization-related policy documents;
- 5.3 ensure the client is 5 years of age or older;
- 5.4 ensure there is a complete client specific order from an authorized prescriber or follow the recommended immunization schedule:
  - 5.4.1 if the order is incomplete or the immunization history is unclear, vaccines must not be administered until it is clarified:
- 5.5 restrict themselves to administering vaccines that are appropriate to the LPN's area of practice;
- 5.6 refer the client to another regulated health practitioner if they are unable to provide the immunization for any reason;
- 5.7 provide assessment and monitoring of the client prior to, during, and post immunization;
- 5.8 manage and report any adverse reactions or refusal of vaccination as defined in regulation;
- 5.9 adhere to legislative and regulatory requirements related to the storage, handling, and transporting of vaccines (e.g. cold chain); and
- 5.10 follow legislated reporting requirements including but not limited to: documentation, unreported immunizations, and adverse events.

#### Section 13(1)(d): Administering Blood or Blood Products

#### Practice Overview:

An LPN is able to perform all aspects of blood and blood product (blood component) administration to clients of any age. This includes but is not limited to setting up the infusion line, picking up blood from the blood bank, and checking, initiating, titrating, monitoring, assessing, and managing client response throughout the infusion.

Note: Administering blood or blood products may require additional training or education for LPNs who graduated from an Alberta practical nursing program prior to June 2022 or from another jurisdiction. A CLPNA module is available. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

#### STANDARD 6: Administering blood or blood product by transfusion or infusion

When an LPN administers a blood or blood product by transfusion or infusion, the LPN must:

- 6.1 adhere to common education and practice standards (Standards 1 and 2);
- 6.2 following an authorized prescriber order or medically approved protocol prior to blood or blood product administration;
- 6.3 ensure written informed consent has been obtained from patient;
- 6.4 adhere to the rights and checks of administration and discontinuation of blood and blood products;
- 6.5 provide ongoing assessment and monitoring of the client, as per employer requirements, prior to, during & post administration of blood or blood products; and
- 6.6 immediately advise the authorized prescriber of any adverse reactions or side effects.

#### STANDARD 7: Administering medications containing blood products

It is important that the LPN remains current on which products contain blood for which LPNs are authorized to administer. Some procedures include the administration of blood products that LPNs are not authorized to administer. If you have questions about what blood products an LPN is not authorized to administer, please contact the CLPNA Professional Practice Department (contact information available on the CLPNA website).

When an LPN administers a medication containing a blood product, the LPN must:

- 7.1 adhere to common education and practice standards (Standards 1 and 2);
- 7.2 ensure the administration of the specific medication containing a blood product is within the LPN authorization;

- 7.3 follow an authorized prescriber order or medically approved protocol;
- 7.4 adhere to the rights and checks of administration and discontinuation of specific medication containing a blood and blood products;
- 7.5 provide ongoing assessment and monitoring of the client, as per employer requirements, prior to, during and post administration of medication containing a blood or blood products; and
- 7.6 immediately advise the authorized prescriber of any adverse reactions or side effects.

Sections 13(1)(e) and 13(2): Dispensing a Schedule I or Schedule II drug (medication) if it is permitted in this Standards of Practice document

#### Practice Overview:

Generally, the legal authority to **dispense** a medication falls within the responsibility of pharmacy (pharmacist or pharmacy technician). An LPN is authorized to dispense medications incidental to the **practice of practical nursing**, according to this standard of practice and any listed exemptions. When pharmacy is not available to dispense the drug and immediate dispensing of the medication is required to meet the needs of the client, there must be a client specific order in place from an authorized prescriber.

Examples of when an LPN may dispense medications include:

- 1. providing a client specific prescribed medication for the client to take while on a facility "pass";
- 2. providing a client with a small amount of "bridge" medication until the client can fill the prescription at a pharmacy; and
- 3. providing a client with specific prescribed medication as part of outpatient treatment programs.

#### An LPN is only authorized to dispense controlled drugs or substances listed in Appendix C.

Note: Dispensing medications may require additional training or education for LPNs who graduated from an Alberta practical nursing program prior to June 2022 or from another jurisdiction. A CLPNA module is available. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

#### **STANDARD 8:** Dispensing medications

When an LPN dispenses a medication, the LPN must:

- 8.1 adhere to common education and practice standards (Standards 1 and 2);
- 8.2 only dispense controlled drugs or substances listed in Appendix C;
- 8.3 have determined that pharmacy is not available to dispense the medication;
- 8.4 be knowledgeable about the CLPNA policy documents related to medication management;
- 8.5 ensure there is a complete client specific medication order or protocol from an authorized prescriber;
  - 8.5.1 If the order is incomplete, medications must not be dispensed until the medication order is clarified;
- 8.6 have a comprehensive understanding of preparation and dispensing as it relates to the practice of practical nursing and the care setting;
- 8.7 not charge the client a fee, nor receive a specific payment, for the preparation and dispensing of medication;

- 8.8 adhere to best practices and employer requirements in dispensing medication (i.e., rights and checks) to reduce the risk of medication error and ensure client safety;
- 8.9 inform and educate the client about the medications they are dispensing;
- 8.10 dispense the minimum amount of medication necessary to ensure the health, safety, and ongoing treatment requirements of the client (per prescriber's order and/or employer requirements);
- 8.11 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; and
- 8.12 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 client;
  - the name of the prescriber;
  - medication name, strength, and dosage;
  - instructions for use, time, and route of administration;
  - the date the drug was dispensed;
  - the quantity dispensed;
  - the drug identification number, if appropriate;
  - any information regarding storage and handling;
  - the expiry date; and
  - any additional information as required by the employer.

#### Section 13(1)(f): Applying non-ionizing radiation in ultrasound imaging

#### Practice Overview:

The LPN role in performing ultrasound imaging focuses on performing **point-of-care** nursing assessments and carrying out nursing care pursuant to an authorized practitioner order or an employer approved medical direction.

An LPN applies ultrasound which may or may not create an image (a form of non-ionizing radiation) in three areas of LPN practice:

- 1. performing point-of-care nursing assessments;
- 2. assisting the authorized practitioner at point-of-care while the practitioner is performing a clinical procedure in imaging not otherwise considered to be a bedside nursing assessment; and
- 3. obtaining a fetal heart rate or performing fetal heart rate monitoring.

Note: Applying non-ionizing radiation in ultrasound imaging may require additional training or education for LPNs who graduated from an Alberta practical nursing program prior to June 2022 or from another jurisdiction. A CLPNA module is available. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

#### STANDARD 9: Applying ultrasound imaging to perform point-of-care nursing assessments

When an LPN applies ultrasound in point-of-care nursing assessments, the LPN must:

- 9.1 adhere to common education and practice standards (Standards 1 and 2);
- 9.2 understand which equipment uses non-ionizing radiation in ultrasound imaging; and
- 9.3 report the results and perform any additional care that may be required.

## **STANDARD 10:** Assisting an authorized practitioner while the practitioner is performing a clinical procedure using ultrasound imaging

When an LPN applies ultrasound imaging while assisting an authorized practitioner who is performing a clinical procedure, the LPN must:

- 10.1 adhere to common education and practice standards (Standards 1 and 2); and
- 10.2 apply the ultrasound imaging under the **direct supervision** of the authorized practitioner (the practitioner is present or immediately available at the point of care).

Sections 13(1)(f) and 13(3): Applying non-ionizing radiation in ultrasound imaging to a fetus for the purpose of fetal heart rate monitoring

#### Practice Overview:

The LPN role in applying ultrasound to a fetus focuses on performing point-of-care nursing assessments and carrying out nursing care pursuant to an authorized practitioner order or an employer approved medical direction.

Specific to fetal heart rate monitoring, the LPN scope of practice includes manual fetal auscultation and external fetal heart monitoring device to the obstetrical client for fetal heart rate monitoring. Note, manual fetal auscultation is not a restricted activity.

#### Supervision Requirement:

The LPN's role in applying non-ionizing radiation in ultrasound to a fetus to for the purpose of fetal heart rate monitoring is to collaborate with the health care practitioner who is responsible for the care of the client for interpretation. LPNs require **indirect remote supervision**, at minimum.

Note: Applying non-ionizing radiation in ultrasound imaging to a fetus requires additional training or education for LPNs who graduated from an Alberta practical nursing program prior to June 2022 or from another jurisdiction. A CLPNA module is available. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

# **STANDARD 11:** Applying non-ionizing radiation in ultrasound imaging to a fetus for the purpose of fetal heart rate monitoring

When an LPN applies non-ionizing radiation in ultrasound to a fetus for the purpose of fetal heart rate monitoring, the LPN must:

- 11.1 adhere to common education and practice standards (Standards 1 and 2);
- 11.2 possess and maintain the competencies listed in the CLPNA Competency Profile related to performing electronic fetal heart rate monitoring, including understanding the technology being used;
- ensure there is an authorized practitioner order or an employer approved protocol for performing electronic fetal heart rate monitoring;
- 11.4 have the ability to identify the risks and precautions, manage any adverse events, and provide ongoing assessment of the client and monitoring of the client and the fetus while performing electronic fetal heart rate monitoring;
- 11.5 perform fetal heart rate monitoring as part of a healthcare team;
- 11.6 engage in ongoing consultation with the authorized practitioner who is responsible for the care of the client at that time; and
- 11.7 provide the fetal heart rate monitor readings for interpretation and management of the results to the authorized practitioner who is responsible for the care of the client.

Section 14(a)(i): Inserting liquid under pressure, into the ear canal, for the purpose of removing wax from ears

#### **Practice Overview:**

An LPN with a client specific order from an authorized practitioner may perform the activity of inserting liquid under pressure into the ear canal, for the purpose of wax removal. This is commonly referred to as ear syringing. Prior to and following ear syringing, an LPN may use an otoscope as part of their assessment.

#### Supervision Requirement:

An LPN is authorized to perform ear syringing under **indirect supervision**. An LPN must ensure that an authorized practitioner is on site and available to provide assistance.

Note: Inserting liquid into the ear canal under pressure to remove ear wax may require additional training or education for LPNs who graduated from an Alberta practical nursing program prior to June 2022 or from another jurisdiction. A CLPNA module is available. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

#### STANDARD 12: Inserting liquid into the ear canal under pressure to remove ear wax (ear syringing)

When an LPN performs ear syringing, the LPN must:

- 12.1 adhere to common education and practice standards (Standards 1 and 2);
- 12.2 ensure that an authorized practitioner is on site and available to provide assistance; and
- 12.3 ensure that there is an order or employer protocol in place.

Section 14(a)(ii): Administering diagnostic imaging contrast agents with direction from an authorized practitioner

#### **Practice Overview:**

An LPN, as part of a healthcare team, may administer diagnostic imaging contrast agents in preparation for diagnostic imaging. Contrast agents are administered by oral, rectal, and intravenous (IV) routes. In some cases, IV routes of these agents may cause severe or life-threatening reactions that require immediate response and management.

#### Supervision Requirement:

An LPN is authorized to administer oral, rectal, or IV diagnostic imaging contrast agents with direction from an authorized practitioner under indirect supervision. An LPN must ensure that an authorized practitioner is on site and available to provide assistance.

Note: Administering diagnostic imaging contrast agents may require additional training or education for LPNs who graduated from an Alberta practical nursing program prior to June 2022 or from another jurisdiction. A CLPNA module is available. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

#### STANDARD 13: Administering diagnostic imaging contrast agents

When an LPN administers diagnostic imaging contrast agents, the LPN must:

- 13.1 adhere to common education and practice standards (Standards 1 and 2);
- adhere to the rights and checks of medication preparation and discontinuation of diagnostic imaging contrast agents to ensure client safety;
- 13.3 ensure that an authorized practitioner is on site and available to provide assistance;
- 13.4 provide ongoing assessment and monitoring of the client prior to, during, and post administration of diagnostic imaging contrast agents; and
- monitor the administration of diagnostic imaging contrast agents as per employer requirements and immediately advise the authorized practitioner of any adverse reactions or side effects.

#### Section 14(b): Administering nitrous oxide for the purposes of anesthesia or sedation

#### Practice Overview:

The role of the LPN in administering nitrous oxide includes assisting the client to self-administer following a prescriber's order and administering nitrous oxide when an authorized practitioner is on site and available to provide immediate assistance if required.

#### Additional Requirement:

An LPN is authorized to administer nitrous oxide for the purposes of anesthesia or sedation when an authorized practitioner is on site and available to provide immediate assistance.

Note: Administering nitrous oxide may require additional training or education for LPNs who graduated from an Alberta practical nursing program prior to June 2022 or from another jurisdiction. A CLPNA module is available. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

#### STANDARD 14: Administering nitrous oxide for anesthesia or sedation

When an LPN administers nitrous oxide for anesthesia or sedation, the LPN must:

- 14.1 adhere to common education and practice standards (Standards 1 and 2);
- 14.2 provide ongoing assessment and monitoring of the client prior to, during, and post administration of nitrous oxide;
- 14.3 adhere to the rights and checks of medication administration and discontinuation of nitrous oxide;
- 14.4 ensure that an authorized practitioner is on site and available to provide immediate assistance;
- 14.5 administer nitrous oxide, as per employer requirements, and immediately advise the authorized practitioner of any adverse reaction or side effects.

Sections 15(1) and 15(2): Performing a psychosocial intervention with an expectation of treating a substantial disorder of thought, mood, perception, orientation or memory that grossly impairs

- (a) judgment,
- (b) behaviour,
- (c) capacity to recognize reality, or
- (d) ability to meet the ordinary demands of life as a member of a multi-disciplinary team and while under the direction of an authorized practitioner who is available for consultation.

#### Practice Overview:

A psychosocial intervention is a restricted activity 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 Government Organization Act

Activities such as nursing assessment, client monitoring, and providing advice, support, and information on lifestyle choices etc. are not restricted activities and can be performed independently by the LPN. However, treating a client who has a substantial disorder using interventions such as psychotherapy or cognitive behavior therapy that alters thoughts or moods is a restricted activity.

#### Supervision Requirement:

An LPN is authorized to perform a psychosocial intervention as a member of a multi-disciplinary team **under direction** and with indirect remote supervision of an authorized practitioner who is available for consultation.

## **STANDARD 15:** Performing psychosocial intervention with an expectation of treating a substantial disorder of thought, mood, perception, orientation or memory

When an LPN provides psychosocial intervention as a member of a multi-disciplinary team, the LPN must:

- 15.1 adhere to common education and practice standards (Standards 1 and 2);
- 15.2 collaborate with and perform the interventions as a member of a multi-disciplinary team;
- 15.3 perform under direction from an authorized practitioner;
- 15.4 ensure that the authorized practitioner providing the direction is available for consultation; and
- 15.5 provide ongoing assessment and monitoring of the client.

# RESTRICTED ACTIVITIES AND ADVANCED PRACTICE REQUIRING ADVANCED AUTHORIZATION

The following restricted activities and LPN advanced practice areas require advanced training approved by either the Registrar or CLPNA Council. These are separated below by type of CLPNA approved education.

#### Advanced training approved by the Registrar for performing restricted activities

- Medication administration via a central venous line (CVC, PICC, or IVAD);
- Inserting or removing instruments, devices, fingers or hands into an artificial opening into the body for the purposes of hemodialysis; and
- Administering parenteral nutrition.

#### Advanced training approved by CLPNA Council for performing restricted activities

- Cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis for the purpose of removing a corn or callus as part of the provision of foot care;
- Cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis for the purpose of performing activities under the direction of an authorized practitioner performing surgery; and
- Setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts under indirect supervision

#### Advanced training approved by CLPNA Council for performing in areas of LPN advanced practice

- Advanced Practice Foot Care:
- Advanced Practice Perioperative Nursing; and
- Advanced Practice Orthopedic Nursing.

For information about advanced authorization and education please see the CLPNA Policy on Practice and Education Requirements for Restricted Activities and Advanced Practice.

It is required that the LPN completes the advanced training or education and have authorization by the Registrar *prior* to performing the restricted activity or performing in these areas of advanced practice.<sup>2</sup> Below are standards for authorized restricted activities and areas of advanced practice requiring advanced authorization for all regulated members on all register categories.

The LPN Regulation section number is noted at the beginning of each individual restricted activity.

 $<sup>^{2}</sup>$ LPNs currently enrolled in advanced training or education in areas that require advanced authorization may practice under supervision in accordance with section 21(1) of the LPN Regulation.

Section 16(1)(a): Inserting or removing instruments, devices, fingers or hands into an artificial opening into the body for the purposes of performing dialysis.

#### **Practice Overview:**

Peritoneal dialysis is not a restricted activity, nor a restricted activity requiring advanced authorization. Peritoneal dialysis has been part of LPN practice prior to and since coming under the HPA in 2003. The related competencies to perform peritoneal dialysis are included in practical nurse entry-level education.

Hemodialysis is the process of removing blood from the body, filtering it through a machine for the purpose of dialysis, and returning it to the body. Hemodialysis involves inserting or removing an instrument or device into an artificial opening and, therefore, it is a restricted activity.

An LPN who has completed advanced training or education and has been authorized by the Registrar may perform hemodialysis.

**STANDARD 16:** Inserting or removing instruments, devices, fingers, or hands into an artificial opening into the body for the purposes of performing hemodialysis.

When an LPN performs hemodialysis involving inserting or removing instruments, devices, fingers, or hands into an artificial opening into the body, the LPN must:

- 16.1 adhere to common education and practice standards (Standards 1 and 2);
- 16.2 have completed advanced training or education in hemodialysis as approved by the Registrar;
- 16.3 have received advanced authorization by the Registrar to perform hemodialysis; and
- 16.4 provide ongoing assessment and monitoring of the client prior to, during, and post hemodialysis.

Section 16(1)(b): Administering medication by an invasive procedure on body tissue below the dermis for the purpose of administering medication into a central venous line (CVC), peripherally inserted central catheter (PICC), or an implanted venous access device (IVAD)

#### Practice Overview:

An LPN administers medications and fluids via central venous lines (CVC, PICC, and IVAD) to all ages, in a variety of practice areas. Central venous lines may also be referred to as central venous access devices (CVADs). An LPN requires CLPNA approved advanced training or education prior to administering medication by an invasive procedure by CVC, PICC, or IVAD. An LPN who has completed advanced training or education and has been authorized by the Registrar may perform medication administration via CVC, PICC, or IVAD without supervision.

Note: For LPNs who graduated from an Alberta practical nursing entry-level program prior to June 2022, or graduated from another jurisdiction, completion of the CLPNA module on medication administration via CVC, PICC, or IVAD is required to obtain advanced authorization. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

#### STANDARD 17: Administering medication by CVC, PICC, or IVAD

When an LPN administers medication by CVC, PICC, or IVAD, the LPN must:

- 17.1 have education or training to perform medication administration by CVC, PICC, or IVAD attained through:
  - 17.1.1 a CLPNA approved practical nurse entry-level education program or equivalent entry-level training; or
  - 17.1.2 the CLPNA post entry-level training or education approved by the Registrar;
- 17.2 adhere to common education and practice standards (Standards 1 and 2);
- 17.3 receive advanced authorization by the Registrar to administer medication by CVC, PICC, or IVAD;
- 17.4 adhere to all policies and best practices for central venous line care and management;
- 17.5 adhere to the rights and checks of medication administration for central venous lines;
- 17.6 provide ongoing assessment and monitoring of the client prior to, during and post medication administration via CVC, PICC, or IVAD; and
- 17.7 immediately advise the most responsible healthcare provider of any adverse reactions or side effects.

#### Section 16(1)(c): Administering Parenteral Nutrition

#### Practice Overview:

Parenteral nutrition is administered to clients of all ages. LPNs play an important role in the care of these clients by providing nursing care such as assessment, monitoring, documenting, and recording. Administering or initiating the flow of parenteral nutrition requires additional knowledge and skills.

Caring for clients who are receiving parenteral nutrition is not a restricted activity requiring advanced authorization. However, an LPN who wishes to initiate or administer parenteral nutrition to their clients must ensure they have the appropriate CLPNA approved advanced training or education and authorization by the Registrar.

Note: For LPNs who graduated from an Alberta practical nursing entry-level program prior to June 2022, or graduated from another jurisdiction, completion of the CLPNA module on administering parenteral nutrition is required to obtain advanced authorization. LPNs who graduated from an Alberta practical nursing program after June 2022 are not required to have additional training or education. For more information please see the CLPNA Policy on *Practice and Education Requirements for Restricted Activities and Advanced Practice*.

#### **STANDARD 18:** Administering parenteral nutrition

An LPN who administers parenteral nutrition must:

- 18.1 have education or training to perform administration of parenteral nutrition attained through:
  - 18.1.1 a CLPNA approved practical nurse entry-level education program or equivalent entry-level training; or
  - 18.1.2 the CLPNA post entry-level training or education approved by the Registrar;
- 18.2 adhere to common education and practice standards (Standards 1 and 2);
- 18.3 receive advanced authorization by the Registrar to administer parenteral nutrition;
- 18.4 adhere to the rights and checks of administration and discontinuation of parenteral nutrition;
- 18.5 provide ongoing assessment and monitoring of the client prior to, during, and post parenteral nutrition administration; and
- 18.6 immediately advise the authorized prescriber of any adverse reactions or side effects.

Section 16(2)(a): cutting a body tissue, administering anything by an invasive procedure on body tissue, or performing surgical or other invasive procedures on body tissue below the dermis for the purposes of removing a corn or callus as part of the provision of foot care

#### Practice Overview:

An LPN requires advanced training approved by the Council and authorization by the Registrar to become an advanced practice foot care LPN. After receiving advanced authorization the LPN may:

- cut a body tissue, administering anything by an invasive procedure on body tissue, or performing surgical or other invasive procedures on body tissue below the dermis for the purposes of removing a corn or callus as part of the provision of foot care; and
- perform advanced practice foot care.

An LPN does not have full authorization for the cutting of tissue on the foot like that of a physician or a podiatrist. An LPN only removes a corn or callus.

An LPN who has completed advanced training or education and has been authorized by the Registrar may remove a corn or callus as part of the provision of foot care without supervision and may perform advanced practice foot care.

Standard 19 refers to the specific restricted activity of removing a corn or callus.

Standard 20 refers to advanced practice foot care as outlined in the CLPNA Competency Profile.

**STANDARD 19:** Cutting a body tissue, administering anything by an invasive procedure on body tissue, or performing surgical or other invasive procedures on body tissue below the dermis for the purposes of removing a corn or callus as part of the provision of foot care

When an LPN cuts a body tissue, administers anything by an invasive procedure on body tissue, or performs surgical or other invasive procedures on body tissue below the dermis for the purposes of removing a corn or callus as part of the provision of foot care the LPN must:

- 19.1 adhere to common education and practice standards (Standards 1 and 2);
- 19.2 complete advanced training or education in removing a corn or callus as approved by the Council;
- 19.3 receive advanced authorization by the Registrar for removing a corn or callus;
- 19.4 adhere to policy and best practices in infection prevention and control as required by the *Alberta Reusable & Single-Use Medical Devices Standards* and related legislation;
- 19.5 assess and refer those clients whose condition requires further treatment by another regulated health professional; and
- 19.6 meet CLPNA requirements related to self-employed practice when removing a corn or callus as part of their self-employed practice.

#### STANDARD 20: Advanced Practice Foot Care

When an LPN performs advanced practice foot care the LPN must:

- 20.1 adhere to common education and practice standards (Standards 1 and 2);
- 20.2 completed advanced training or education in advanced practice foot care as approved by the Council;
- 20.3 receive advanced authorization by the Registrar for advanced practice foot care;
- 20.4 meet best practices in infection prevention and control as required by the Alberta Reusable & Single-Use Medical Devices Standards and related legislation;
- 20.5 adhere to policy and best practices regarding advanced practice foot care including, but not limited to, safe infection prevention control, the safe operation of tools and devices used in advanced practice foot care, and CLPNA requirements for preparing and sanitizing reusable medical devices;
- 20.6 assess and refer those clients whose condition requires further treatment by another regulated health professional; and
- 20.7 meet CLPNA requirements related to self-employed practice when providing advanced practice foot care as part of their self-employed practice.

Section 16(2)(b): cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis under direction of an authorized practitioner who is performing surgery

#### **Practice Overview:**

An LPN requires advanced training approved by the Council and authorization by the Registrar to become an advanced practice perioperative LPN. After receiving advanced authorization the LPN may:

- engage in cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis under direction of an authorized practitioner who is performing surgery; and
- perform advanced practice perioperative nursing.

Perioperative LPNs provide preoperative, intraoperative, and immediate post-operative client care. The CLPNA Competency Profile sets out competency requirements for advanced practice perioperative nursing.

Standard 21 refers to the specific restricted activity of cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis under direction of an authorized practitioner who is performing surgery.

Standard 22 refers to advanced practice perioperative nursing as outlined in the CLPNA Competency Profile.

STANDARD 21: Cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis under direction of an authorized practitioner who is performing surgery

When an LPN engages in cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis under direction of an authorized practitioner who is performing surgery nursing, the LPN must:

- 21.1 adhere to common education and practice standards (Standards 1 and 2);
- 21.2 complete advanced training or education approved by the Council;
- 21.3 receive advanced authorization by the Registrar; and
- 21.4 perform activities under direction of an authorized practitioner who is performing surgery.

#### STANDARD 22: Advanced Practice Perioperative Nursing

When an LPN engages in perioperative nursing, the LPN must:

- 22.1 adhere to common education and practice standards (Standards 1 and 2);
- 22.2 complete advanced training or education in advanced practice perioperative nursing approved by the Council;
- 22.3 receive advanced authorization by the Registrar for advanced practice perioperative nursing;
- 22.4 meet the competency requirements for advanced practice perioperative nursing in the CLPNA Competency Profile; and
- 22.5 perform activities under direction of an authorized practitioner who is performing surgery.

Sections 17(a) and 17(b): Setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts

#### Practice Overview:

An LPN requires advanced training approved by the Council and authorization by the Registrar to become an advanced practice orthopedic LPN. After receiving advanced authorization the LPN may:

- set or reset a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts under the direction of (including verbal and written direction) an authorized practitioner provided an authorized practitioner is onsite and available to provide assistance; and
- perform advance practice orthopedic nursing.

Standard 23 refers to the specific restricted activity of setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts.

Standard 24 refers to advanced practice orthopedic nursing as outlined in the CLPNA Competency Profile.

## **STANDARD 23:** Setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts

When an LPN engages in the practice of setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts, the LPN must:

- 23.1 adhere to common education and practice standards (Standards 1 and 2);
- 23.2 complete advanced training or education in setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts as approved by the Council;
- 23.3 receive advanced authorization by the Registrar for setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts;
- 23.4 have a verbal or written order from an authorized practitioner prior to initiating procedures related to setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts; and
- 23.5 ensure an authorized practitioner is on site and available to provide assistance.

#### STANDARD 24: Advanced Practice Orthopedic Nursing

When an LPN engages in the advanced practice of LPN orthopedic nursing, the LPN must:

- 24.1 adhere to common education and practice standards (Standards 1 and 2);
- 24.2 complete advanced training or education in advanced practice orthopedic nursing as approved by the Council;
- 24.3 receive advanced authorization by the Registrar for advanced practice orthopedic nursing; and
- 24.4 have direction from an authorized practitioner.

## **GLOSSARY OF TERMS**

This glossary explains some of the terms used in the Standards of Practice on Restricted Activities and Advanced Practice:

**Additional training:** the training required if education and training to perform a restricted activity was not obtained through approved practical nurse education program or equivalent (e.g. CLPNA module, orientation, on the job training, training manual).

**Advanced authorization:** certain restricted activities and areas of advanced practice require specific permission by the Registrar for the LPN to perform.

**Advanced practice:** an area of practice that requires advanced education or training and advanced authorization by the Registrar for an LPN to perform.

**Advanced training or education:** authorized educational modules, courses, or programs approved by the Council or Registrar prior to performing a restricted activity requiring advanced authorization.

**Authorized practitioner:** for the purpose of the LPN Regulation, an authorized practitioner is a regulated professional who is authorized and competent to perform a restricted activity while providing health services but does not include an LPN. In other nursing contexts an LPN may be considered an authorized practitioner.

**Authorized prescriber:** a person regulated under the *Health Professions Act*, who is authorized to prescribe a Schedule I drug, within the meaning of the *Pharmacy and Drug Act*.

**Bridge medication:** medications that may be dispensed to patients on discharge when the patient does not have adequate and timely access to a pharmacy to have the prescription filled.

Client: any patient to whom a LPN provides care.

**Clinical Judgement:** processes that rely on critical inquiry to reflect the complex, intuitive and conscious thinking strategies that guide nursing decisions.

**Competence:** the ability to integrate and apply the knowledge, skills, behaviours, judgments, and personal attributes required to practise safely and ethically in a designated role and setting. Personal attributes include, but are not limited to, attitudes, values, and beliefs.

**Competency/Competencies:** detailed statements that define the knowledge, skills, behaviors, judgments, and personal attributes required by a LPN to practice within the profession (refer to the Competency Profile for Licensed Practical Nurses of Alberta).

**Dispense:** 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 (see Appendix C for a list of medications LPNs are authorized to dispense under specific circumstances).

**Licensed Practical Nurse or LPN:** a person registered, as a regulated member, on one of the register categories at the College of Licensed Practical Nurses of Alberta outlined in the LPN regulation.

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

Pass medication: medication dispensed when a patient is temporarily leaving the hospital, clinical unit, or facility and is scheduled to take ordered medications while away on pass.

**Schedule I drugs:** drugs that require a prescription as a condition of sale.

**Schedule II drugs:** drugs that are available without a prescription but must be obtained from a pharmacist. There is no opportunity for patient self-selection.

**Point-of-care:** the point of time and setting in which nursing care is provided directly to the client.

**Regulated health professional/practitioner:** a health professional regulated under the *Health Professions Act* or *Health Disciplines Act*.

Restricted Activities: high risk health services listed in Schedule 7.1 of the Government Organization Act.

**Practice of Practical Nursing:** the scope of practice of LPNs (as described in Section 3 of Schedule 10 of the HPA, see Appendix B).

**Supervision:** the consultation, guidance, and oversight by an authorized practitioner in the practice setting. Supervision may be direct, indirect, or indirect remote.

- **Direct Supervision:** an authorized practitioner is physically present at the point of care.
- Indirect Supervision: an authorized practitioner is available for consultation and guidance, but is not required to be physically present at the point of care. This person providing indirect supervision is readily available on site and can go provide assistance when needed.
- Indirect Remote Supervision: an authorized practitioner is available for consultation and guidance, but is not required to be physically present at the point of care. This person providing remote supervision can be easily contacted through technology when assistance is needed.

**Standards of Practice:** standards of practice set out the minimum standard of professional behaviour and practice to which an LPN is held accountable.

**Under Direction:** performing a nursing intervention under the instruction or orders of an authorized practitioner.

## **APPENDICES**

## Appendix A – LPN Regulation Excerpt of Restricted Activities

#### **Restricted Activities**

#### **Authorized activities**

- **13(1)** A regulated member may, in the practice of licensed practical nursing, perform the following restricted activities in accordance with the standards of practice:
  - (a) with the exception of the activities described in section 16(1)(a), inserting or removing instruments, devices, fingers or hands
    - (i) beyond the point in the nasal passages where they normally narrow,
    - (ii) beyond the pharynx,
    - (iii) beyond the opening of the urethra,
    - (iv) beyond the labia majora,
    - (v) beyond the anal verge, or
    - (vi) into an artificial opening into the body;
  - (b) with the exception of the activity described in section 16(1)(b), administering anything by an invasive procedure on body tissue below the dermis for the purpose of administering injections or for starting a peripheral intravenous line;
  - (c) administering vaccines for the purpose of providing immunizations where the recipient of the immunization is 5 years of age or older;
  - (d) administering blood or blood products;
  - (e) subject to subsection (2), dispensing a Schedule 1 or Schedule 2 drug within the meaning of the *Pharmacy and Drug Act* when incidental to the practice of licensed practical nursing;
  - (f) subject to subsection (3), applying non-ionizing radiation in ultrasound imaging.
- (2) A regulated member referred to in subsection (1) shall not dispense a Schedule 1 or Schedule 2 drug within the meaning of the *Pharmacy and Drug Act* if that drug is set out in a Schedule to the *Controlled Drugs and Substances Act* (Canada), unless that drug has been specifically exempted for the purpose of this section in the standards of practice.
- (3) A regulated member referred to in subsection (1) shall only apply non-ionizing radiation in ultrasound imaging to a fetus for the purpose of fetal heart rate monitoring.

AR 81/2003 s13;131/2019

#### Activities authorized with supervision

- **14** A regulated member may, in the practice of licensed practical nursing, perform the following restricted activities in accordance with the standards of practice:
  - (a) if an authorized practitioner is on site and available to provide assistance
    - (i) where it is specifically authorized by an authorized practitioner, inserting liquid, under pressure, into the ear canal for the purpose of removing wax from ears;
    - (ii) administering diagnostic imaging contrast agents with direction from an authorized practitioner;

(b) if an authorized practitioner is on site and available to provide immediate assistance, administering nitrous oxide for the purposes of anaesthesia or sedation.

AR 81/2003 s14;131/2019

#### **Psychosocial intervention**

- **15(1)** Subject to subsection (2), a regulated member may, in the practice of licensed practical nursing and in accordance with the standards of practice, as a member of a multi-disciplinary team, perform a psychosocial intervention with an expectation of treating a substantial disorder of thought, mood, perception, orientation or memory that grossly impairs
  - (a) judgment,
  - (b) behaviour,
  - (c) capacity to recognize reality, or
  - (d) ability to meet the ordinary demands of life.
- (2) A regulated member shall only perform a psychosocial intervention referred to in subsection (1) with direction from an authorized practitioner who is available for consultation.

AR 81/2003 s15;131/2019

#### Activities requiring advance authorization

- **16(1)** A regulated member who has completed advanced training approved by the Registrar and has been specifically authorized to do so by the Registrar on the basis of that training may, in the practice of licensed practical nursing, perform the following restricted activities in accordance with the standards of practice:
  - (a) inserting or removing instruments, devices, fingers or hands into an artificial opening into the body for the purposes of performing dialysis;
  - (b) administering medication by an invasive procedure on body tissue below the dermis for the purpose of administering medication into a central venous line, peripherally inserted central catheter or an implanted venous access device;
  - (c) administering parenteral nutrition.
- (2) A regulated member who has completed advanced training approved by the Council and has been specifically authorized to do so by the Registrar on the basis of that training may, in the practice of licensed practical nursing and in accordance with the standards of practice, perform the restricted activity of cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis for the purposes of performing the following activities:
  - (a) removing a corn or callus as part of the provision of foot care;
  - (b) performing activities under the direction of an authorized practitioner who is performing surgery.

AR 81/2003 s16;131/2019

#### Activities requiring advance authorization and supervision

- 17 A regulated member who has completed advanced training approved by the Council and has been specifically authorized to do so by the Registrar on the basis of that training may, in the practice of licensed practical nursing and in accordance with the standards of practice, perform the restricted activity of setting or resetting a fracture of a bone for the purposes of inserting and removing orthopaedic devices and applying casts, if
  - (a) the regulated member has direction from an authorized practitioner, and
  - (b) an authorized practitioner is on site and available to provide assistance.

AR 81/2003 s17;131/2019

**18** and **19** Repealed AR 131/2019 s10.

## Appendix B – Schedule 10 of the Health Professions Act

#### **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

## Appendix C - Drug Schedule for Standard 8

Generally, the legal authority to dispense a medication falls within the responsibility of pharmacy (pharmacist or pharmacy technician). Sections 13(1)(e) and 13(2) of the LPN Regulation authorizes LPNs to dispense Schedule I or Schedule II drugs as per the *Standards of Practice on Restricted Activities and Advanced Practice*.

In accordance with Section 13(2) of the LPN Regulation, LPNs are authorized to dispense the following schedules of drugs if the dispensing of a specific drug is *incidental* to the practice of practical nursing outlined in Standard 8:

LPNs may dispense Schedule I and II controlled drugs or substances as listed in the *Controlled Drugs and Substances Act* (https://laws-lois.justice.gc.ca/eng/acts/c-38.8/).

# Appendix D – Overview Tables for Standards of Practice on Restricted Activities and Advanced Practice

Important: LPNs are responsible to ensure they have any required education or training and the individual competence prior to performing these restricted activities.

#### Key

- ★ = Required for graduates of Alberta PN programs before June 2022
- = CLPNA module available, but not required
- = CLPNA module required for advanced authorization
- Additional Education is only needed if the LPN is going to be performing the restricted activity

#### **Definitions:**

**Restricted Activity:** a high-risk health service listed in Schedule 7.1 of the *Government Organization Act*.

**Advanced Authorization:** activities and areas of advanced practice that require the LPN to have advanced training or education and authorization by the Registrar.

Restricted Activity	Standard	Advanced Auth.	Supervision (at minimum)	Additional Education	AB PN Program (Pre-2022)	AB PN Program (Post-2022)
Inserting or removing instruments, devices, fingers or hands during client care	3	No	N/A	N/A	Yes	Yes
Administering anything by an invasive procedure on body tissue below the dermis for the purpose of administering injections or for starting a peripheral intravenous line	4	No	N/A	Possible  A	Yes	Yes
Administering vaccines for the purpose of providing immunizations where the recipient of the vaccine is 5 years of age or older	5	No	N/A	Yes *	Has Related Competencies	Yes
Administering Blood or Blood Products	6 & 7	No	N/A	Yes	Has Related Competencies	Yes
Dispensing a Schedule I or Schedule II drug (medication) ("pass" and "bridge" medications)	8	No	N/A	Yes *	Has Related Competencies	Yes

Restricted Activity	Standard	Advanced Auth.	Supervision (at minimum)	Additional Education	AB PN Program (Pre-2022)	AB PN Program (Post-2022)
Applying non-ionizing radiation in ultrasound imaging (general)	9	No	N/A	Yes	Has Related Competencies	Yes
	10	No	Yes – Direct	Yes *	Has Related Competencies	Yes
Applying non-ionizing radiation in ultrasound imaging to a fetus for the purpose of fetal heart rate monitoring	11	No	Yes – Indirect Remote	Yes	Has Related Competencies	Yes
Inserting liquid under pressure, into the ear canal, for the purpose of removing wax from ears	12	No	Yes – Indirect	Possible	Yes	Yes
Administering diagnostic imaging contrast agents with direction from an authorized prescriber	13	No	Yes – Indirect	Yes *	Has Related Competencies	Yes
Administering nitrous oxide for the purposes of anesthesia or sedation	14	No	Yes – Direct	Possible	Yes	Yes
Performing a psychosocial intervention	15	No	Yes – Indirect Remote	Possible	Yes	Yes
Inserting or removing instruments, devices, fingers or hands into an artificial opening into the body for the purposes of performing hemodialysis	16	Yes	N/A	Yes – Registrar approved	No	No
Administering medication by CVC, PICC, or IVAD	17	Yes	N/A	Yes – Registrar approved	Has Related Competencies	Yes

Restricted Activity	Standard	Advanced Auth.	Supervision (at minimum)	Additional Education	AB PN Program (Pre-2022)	AB PN Program (Post-2022)
Administering Parenteral Nutrition	18	Yes	N/A	Yes – Registrar approved	Has Related Competencies	Yes
Cutting a body tissue, administering anything by an invasive procedure on body tissue, or performing surgical or other invasive procedures on body tissue below the dermis for the purposes of removing a corn or callus as part of the provision of foot care	19	Yes	N/A	Yes – Council approved	No	No
Cutting a body tissue, administering anything by an invasive procedure on body tissue or performing surgical or other invasive procedures on body tissue below the dermis under direction of an authorized practitioner who is performing surgery	21	Yes	No Supervision – practice under direction	Yes – Council approved	No	No
Setting or resetting a fracture of a bone for the purposes of inserting and removing orthopedic devices and applying casts	23	Yes	Yes – Indirect	Yes – Council approved	No	No

Area of Advanced Practice	Standard	Advanced Auth.	Supervision (at minimum)	Additional Education	AB PN Program (Pre-2022)	AB PN Program (Post-2022)
Advanced Practice Foot Care	20	Yes	N/A	Yes – Council approved	No	No
Advanced Practice Perioperative Nursing	22	Yes	No Supervision – practice under direction	Yes – Council approved	No	No
Advanced Practice Orthopedic Nursing	24	Yes	No Supervision – practice under direction	Yes – Council approved	No	No



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